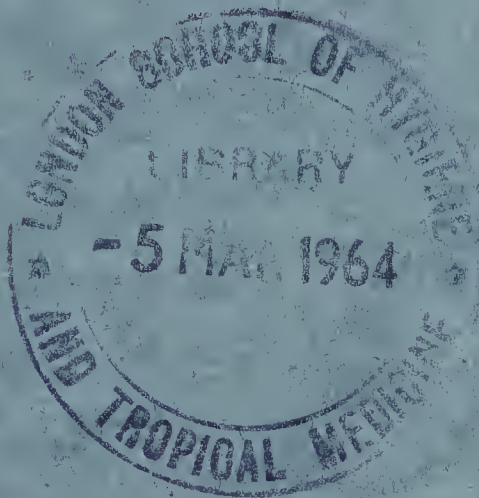


456  
C.B. 46  
2 Kirkstall & Preston  
3 Library  
2

COUNTY BOROUGH OF PRESTON.



# REPORT

OF THE

## Medical Officer of Health

on the Health of the Borough  
for the year  
1955.



PRESTON:  
MATHER BROS. (PRINTERS) LTD  
ONE, GARSTANG ROAD,  
1956







COUNTY BOROUGH OF PRESTON.



# REPORT

OF THE

## Medical Officer of Health

on the Health of the Borough

for the year

# 1955.

---

PRESTON:  
MATHER BROS. (PRINTERS) LTD.  
ONE, GARSTANG ROAD,  
1956





# ANNUAL REPORT, 1955

---

## TABLE OF CONTENTS

---

	PAGE
INTRODUCTION ... ..	5
STAFF AND COMMITTEE FUNCTIONS ... ..	7
STATISTICS AND SOCIAL CONDITIONS OF THE AREA ... ..	10
GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA ...	21
PREVALENCE AND CONTROL OVER INFECTIOUS DISEASE ...	47
SANITARY CIRCUMSTANCES OF THE AREA ... ..	67
HOUSING ... ..	81
FOOD AND DRUGS ... ..	86
PORT HEALTH ADMINISTRATION ... ..	100
WELFARE SERVICES ... ..	109
APPENDICES ... ..	119
SCHOOL HEALTH SERVICE ... ..	131



Digitized by the Internet Archive  
in 2018 with funding from  
Wellcome Library

<https://archive.org/details/b29998530>



## INTRODUCTION.

*To the Chairman and Members of the Health Committee.*

The annual report on the health of the inhabitants of the borough is as usual compiled in accordance with the advice tendered by the Ministry of Health. From the vital statistics set out in the first chapter it will be seen that generally despite a year of plentiful sunshine and low rainfall the satisfactory position developed over the past half dozen years has been no more than barely maintained, that the difficulties of overcoming the hard core of maternal and infant mortality have not yet been solved and that as old problems, such as some of the infections, have been effectively tackled—others, such as fatal accidents, lung cancer and the stress diseases rise to take their place. The mortality tables are still worthy of close study as an indication of where our future action should lie.

There has been much activity during the year in the field of environmental hygiene. Clearly the satisfactory housing of the people is a first essential and with the immediate post war difficulties out of the way, it has been possible to get slum clearance into full swing. In this respect, your attention is drawn to the change in the character of demand for new houses. As members are aware, I have for some years past, been advising the Housing Committee on selected cases where rehousing has appeared to be an urgent matter. From the many requests for help in rehousing that I have received in the past, gross overcrowding was the principal factor in the majority of pleas, but in more recent times this group has dwindled almost to vanishing point. Secondly, the urgent demand for temporary accommodation at the Civic Hostel for homeless families which was so great a problem, has now lessened to the extent that it has been possible to close a portion of the accommodation reserved for this purpose. Thirdly, “house on sale” notices are again relatively common whilst the public auctioning of houses with vacant possession has generally been replaced by press notices of sale by private treaty, an indication that house agents have now to look for potential buyers. These straws suggest that the strenuous efforts of the housing committee to supply new houses have borne fruit and that the general demand has been to a large extent met. There are still special needs to be met amongst which the claim of the slum dweller is paramount. It would seem also that the activities of the health committee in the provision of hostel accommodation has resulted in saturation point being achieved at least for the next few years.

Also in the field of environmental hygiene progress has been made in the establishment of Preston's first smokeless zone and it is a pleasure to record that this has been achieved with the willing co-operation of the people of the town. Since the health committee's plans envisage the rapid extension of this zone in the centre of the town it is surprising that it has not yet been possible to apply the same principle of smokelessness to the new council estates by the simple procedure of the tenancy agreement. Such an arrangement has prevailed in many towns for some years now, it has proved simple to apply and successful in operation. I know of no reason why it should not be equally successful in Preston.

Of the other services that are provided by the Corporation, some are old in years and others that were new so recently are now fully developed and their functions are carried out effectively and conscientiously by the staff without the necessity of reference to the Committee except through the medium of monthly and annual reports. The port health service is one about which little is heard but which, by virtue of the rapid increase in trade and the growing importance of the port of Preston, has expanded considerably in the last few years. This service has ceased to be one that can be carried out by staff as a part time activity to be fitted in in spare moments and now demands the unceasing attention of the staff involved.

I have pleasure in recording my thanks to the whole of the staff for the vigour and enthusiasm with which they have fulfilled their various functions, the sum of which constitutes the material for this report.

J. S. G. BURNETT,  
Medical Officer of Health.



## Senior Public Health Officers of the Local Authority.

Medical Officer of Health and Port Medical Officer ... ..	J. S. G. BURNETT, M.D., D.P.H.
Deputy Medical Officer of Health and Deputy Port Medical Officer	F. S. MELVILLE, M.B., Ch.B., D.P.H.
Assistant Medical Officers and School Medical Officers ...	G. F. A. MCLEAN, M.B., Ch.B., D.P.H. K. DOWLING, M.B., Ch.B. N. RIDEHALGH, M.B., Ch.B. L. G. SAMUEL, M.B., Ch.B., D.P.H. J. H. WALSH, L.R.C.P.I., L.R.C.S.I., D.P.H. C. D. BAUGH, M.B., Ch.B., M.R.C.O.G.
Chest Physician ... ..	W. GRIFFEL, M.D. Vienna, L.R.C.P., L.R.C.S., Ed., L.R.F.P.S. Glas.

### CLINICIANS UNDERTAKING CON- SULTATIVE WORK—

Consultant Obstetrician ... ..	R. H. J. M. CORBET, F.R.C.S.I., F.R.C.P.I., F.R.C.O.G.
Consultant Oto-rhino larynologist	J. A. KERSLEY, F.R.C.S., D.L.O.
Consultant Orthopaedic Surgeon...	R. S. GARDEN, M.Ch.Orth., F.R.C.S.
Consultant Paediatrician ...	A. G. HESLING, M.R.C.P., D.C.H.
Consultant Psychiatrist ... ..	C. S. PARKER, M.D., D.P.M.
Consultant Orthodontist ... ..	F. D. ROWE, L.D.S.
Ophthalmic Surgeons ... ..	*W. SYKES, L.R.C.P., L.R.C.S., L.R.F.P.S. *D. PLUM, M.R.C.S., L.R.C.P., D.T.M. *J. MATTHEWS, M.R.C.S., L.R.C.P., D.P.H.
Senior Dental Officer ... ..	J. C. KNOWLES, L.D.S.
Chief Sanitary Inspector ... ..	E. OWEN, M.R.San.I., M.S.I.A.
Veterinary Officer... ..	F. J. PROCTOR, B.Sc., M.R.C.V.S., D.V.S.M.
Superintendent Health Visitor ...	Miss E. W. SOWERBY, S.R.N., S.C.M., H.V.'s Certificate.
Non-Medical Supervisor of Mid- wives ... ..	Miss F. L. HOLMES, S.R.N., S.C.M.
Superintendent District Nurse ...	Miss E. ANDERSON, S.R.N., S.C.M., Q.N. (appointed 16.2.55).
Domestic Help Organiser ...	Miss S. E. DOHERTY.

Speech Therapists	...	...	Mrs. D. A. LOGAN, L.C.S.T. *Mrs. J. SPENCER, L.C.S.T. (resigned 10.2.55). Miss S. E. PHIZACKERLEY, L.C.S.T. *Mrs. R. M. WILLIAMS, L.C.S.T. (appointed 2.5.55).
Physiotherapists	...	...	Miss E. B. MANNING, S.R.N., C.S.M.M.G., M.E., L.E.T. Miss A. R. HARRISON, C.S.M.M.G., M.E., L.E.T. Mrs. G. E. C. IBBOTSON, C.S.M.M.G., M.E., L.E.T., M.A.O.T. *Mrs. J. BROOME, M.C.S.P., M.E., L.E.T. (resigned 4.2.55). Mrs. D. HOLMES, M.C.S.P. (appointed 1.9.55).
Psychiatric Social Worker	...	...	Mrs. K. M. RYDEN, P.S.W. Cert.
Lay Administrative Assistant	...	...	R. HARRISON, Cert. R.S.I. and S.I.E.J.B.

*\*Part-time.*

## Committee concerned with Public Health matters.

### HEALTH COMMITTEE.

Duties, powers and functions of the Council delegated to the Health Committee subject to the confirmation of their proceedings by the Council :—

- (a) all matters relating to the health of the borough and the prevention, notification and treatment of disease, not otherwise delegated to this or some other committee of the Council ;
- (b) the superintendence of the department of the Medical Officer of Health (other than those officers mainly attached to services administered by other committees) and the appointment of sanitary inspectors ;
- (c) the Rag Flock and Other Filling Materials Act, 1951 ; the Fabrics (Misdescription) Act, 1913, the Fertilisers and Feeding Stuffs Act, 1926, the Agricultural Produce (Grading and Marking) Acts, 1928 and 1931, the Riding Establishments Act, 1939, and any Orders, Rules, Regulations or Byelaws having effect under any of the said Acts ;
- (d) the provisions of the Nurses Acts, 1943 and 1945 ;
- (e) as the Port Health Authority ;
- (f) as the Local Health Authority under the National Health Service Acts, 1946 to 1952 ;
- (g) Part III of the National Assistance Act, 1948, relating to the provision of residential and temporary accommodation and the provision of welfare services for handicapped persons ;
- (h) Part IV of the National Assistance Act, 1948, except the registration of charities for disabled persons ;
- (i) the provision and maintenance of public sanitary conveniences,



Duties, powers and functions of the Council delegated to the Health Committee :—

- (a) the Diseases of Animals Act, 1950, for the purpose of which the committee shall be the executive committee ;
- (b) the Slaughter of Animals Acts, 1933 to 1954 ;
- (c) the Pharmacy and Poisons Acts, 1852 to 1941 ;
- (d) the provisions of the Public Health Acts and local Acts, so far as they relate to health and sanitary matters, and in particular, but without prejudice to the generality of the foregoing delegation, the following provisions of the Public Health Act, 1936, viz. :—  
Sections 39 to 41 ; 44 to 52 ; 56 ; 58 ; 83 to 86 ; Part III ; Sections 124 ; 138 to 141 ; Parts IX and X ; Sections 259 to 261 ; 268 ; 269 and 288.
- (e) the Housing Acts, 1936 to 1952, so far as they relate to insanitary property and overcrowding ;
- (f) Part I (Health General Provisions) and Part VIII (Home Work) of the Factories Act, 1937 ;
- (g) the Food and Drugs Acts, 1955 (except Part III) and the Merchandise Marks Acts, 1887 to 1926 ;
- (h) the provisions of the Shops Acts relating to health and welfare ;
- (i) Prevention of Damage by Pests Act, 1949 ;
- (j) the Rivers Pollution Prevention Acts ;
- (k) the Midwives Act, 1951 ;
- (l) the Pet Animals Act, 1951 ;
- (m) the Heating Appliances (Fireguards) Act, 1952.
- (n) Sections 11 and 12 of the Housing Repairs and Rents Act, 1954, and Part II thereof so far as it relates to the granting and revocation of certificates that the conditions justifying increases of rents of dwelling houses are not fulfilled.

## **SUB-COMMITTEES OF THE HEALTH COMMITTEE.**

### **Mental Health Services Sub-committee.**

Duties under the Lunacy, Mental Treatment and Mental Deficiency Acts, and the care and after-care of persons suffering from mental illness or defectiveness.

### **Domiciliary Services Sub-committee.**

Duties relating to the care of mothers and young children, midwifery, health visiting, home nursing, vaccination and immunisation, prevention of illness, care and after-care (except of persons suffering from mental illness or defectiveness) and domestic helps.

### **Homes, Hostels and Welfare Services Sub-committee.**

Duties concerned with the provision of residential accommodation for the aged and infirm and others in need of care and attention, the provision of temporary accommodation for persons in urgent need of such accommodation, and the registration and inspection of disabled persons' or old persons' homes provided otherwise than by the local authority, and with the provision of welfare services for the blind, deaf and dumb, crippled and others suffering from disabilities.

## Statistics and Social Conditions of the Area.

Area	...	...	...	...	...	...	...	...	(acres)	5,963.5
Population (Registrar General's mid-year estimate, 1955)	...	...	...	...	...	...	...	...	...	117,400
(Census, April 1951—119,250)										
Number of inhabited houses, according to Rate books (as at 1.4.55)	...	...	...	...	...	...	...	...	...	37,141
Rateable Value (as at 1.4.55)	...	...	...	...	...	...	...	...	...	£798,135
Sum represented by a Penny Rate (Financial year, 1955-56)	...	...	...	...	...	...	...	...	...	£3,232
Total cost of services administered by the Health Committee for the year ending 31st March, 1956 :—										
Expenditure	...	...	...	...	...	...	...	...	...	£341,479
Income	...	...	...	...	...	...	...	...	...	£165,901
Net cost	...	...	...	...	...	...	...	...	...	£175,578

						<i>Birth Rate per 1,000 of population</i>	
						<i>Crude</i>	<i>* Adjusted</i>
		<i>Total</i>	<i>Males</i>	<i>Females</i>		<i>Rate</i>	<i>Rate</i>
Live Births	...	1,832	957	875		15.60	15.60
Legitimate	...	1,735	906	829		14.78	14.78
Illegitimate	...	97	51	46		0.83	0.83

Deaths of Infants under one year of age : 53.

Death-rate of Infants under one year of age per 1,000 live births :

<i>Legitimate</i>	<i>Illegitimate</i>	<i>Total</i>
28	41	29

Number of Still-births : 44.

Rate per 1,000 total births : 24.02.

Deaths of Infants under one month : 34.

Neo-natal mortality rate : 18.56 per 1,000 live births.

Deaths—nett : 1,459. Rate per 1,000 population : 12.43 (crude rate)  
13.42 (adjusted rate).

Percentage of total deaths in hospitals and public institutions : 40.23.

Number of Marriages : 1,016.

Number of women dying in or in consequence of child birth : 2.

	<i>Deaths</i>	<i>Rate per 1,000 live and still-births</i>
From Sepsis	—	—
From other causes	2	1.07

Deaths from Cancer (all ages) : 234.

Deaths from Measles (all ages) : Nil.

Deaths from Whooping Cough (all ages) : Nil.

Deaths from Diarrhoea (under 2 years of age) : One.

* Area comparability factor : Births	...	1.00
Deaths	...	1.08



**Table 1.**  
**Comparative Statement of Vital Statistics.**  
**Year 1955.**

	Birth Rate	Death Rate	Infant Mortality Rate		Death Rate from Phthisis	Death Rate from other Tub. Diseases	Maternal Mortality Rate (per 1,000 Total Live and Still Births)		
			Year 1955	Average 5 years 1950-54			Maternal causes excluding abortion	Due to abortion	Total maternal mortality
England and Wales ...	15.00	11.70	24.90	28.0	0.15	0.15	0.54	0.11	0.64
160 Great Towns ...	14.9	11.6	25.1	*	0.17	0.17	*	*	*
Birkenhead ...	16.67	13.67	27.91	34.8	0.16	0.01	—	—	—
Burnley ...	14.96	15.07	22.86	34.39	0.09	0.03	0.82	0.82	1.63
Bury ...	14.40	14.40	37.0	31.0	0.19	0.02	—	—	—
Halifax ...	14.29	15.73	21.69	31.41	0.15	0.01	—	0.70	0.70
Liverpool ...	19.6	11.9	30.0	35.0	0.24	0.02	0.51	0.06	0.57
Manchester ...	16.91	12.68	28.37	33.49	0.19	0.02	0.50	0.25	0.75
Oldham ...	14.61	15.16	30.7	32.0	0.13	0.07	—	—	—
<b>Preston ...</b>	<b>15.60</b>	<b>13.42</b>	<b>29.00</b>	<b>32.0</b>	<b>0.16</b>	—	<b>0.53</b>	<b>0.53</b>	<b>1.07</b>
Rochdale ...	14.3	14.2	16.6	39.0	0.10	0.01	0.77	—	0.77
Salford ...	15.95	12.30	30.0	34.89	0.22	0.02	0.71	—	0.71
St. Helens ...	16.04	11.04	32.87	39.87	0.21	0.04	3.25	0.54	3.79
Stockport ...	14.61	13.79	33.47	34.58	0.13	0.01	0.47	—	0.47
Wallasey ...	15.90	12.28	25.40	28.21	0.20	0.03	1.24	—	1.24
Wigan ...	13.79	11.06	33.3	38.4	0.12	0.01	—	—	—

\* NOT AVAILABLE.

Table 2.  
Vital Statistics of whole District during 1955 and previous ten years.

Year	Total Population	Births (Nett)		Total Deaths Registered in the District		Transferable Deaths		Nett Deaths belonging to the District			
		Number	Rate	Number	Rate	Of Non- Residents Registered in the District	Of Residents not Registered in the District	Under 1 year of age		At all ages	
								Number	Rateper 1,000 Nett Births		
											Number
1945	108,480	1,949	17.97	1,385	12.77	257	386	99	51	1,514	13.96
1946	114,070	2,380	20.86	1,354	11.87	243	327	134	56	1,438	12.61
1947	116,520	2,574	22.09	1,497	12.85	296	377	178	69	1,578	13.54
1948	118,130	2,219	18.78	1,443	12.22	280	328	86	39	1,491	12.62
1949	119,500	2,170	18.16	1,433	11.99	288	324	94	43	1,469	12.91*
1950	120,300	2,101	17.46	1,536	12.77	286	300	68	32	1,550	13.39
1951	118,100	1,962	16.61	1,731	14.66	292	377	68	35	1,816	15.99
1952	119,200	1,960	16.44	1,439	12.07	292	306	63	32	1,453	12.67
1953	118,900	1,914	16.10	1,430	12.03	328	252	63	33	1,354	11.83
1954	118,400	1,823	15.40	1,450	12.25	317	274	50	27	1,407	12.83
1955	117,400	1,832	15.60	1,503	12.80	355	311	53	29	1,459	13.42

\* The death rate from the year 1949 onwards has been adjusted in accordance with the area comparability factor supplied by the Registrar General annually. The figures for earlier years are crude death rates.

	Census 1931	Census 1951
Area of District in acres (Land and Inland Water)	4,029	5,684
Average rooms per occupied dwelling ...	4.47	4.35
Average family occupation ...	4.36	4.15
Number of families per occupied dwelling ...	1.02	1.05
Average size of private family ...	3.78	3.24
Average number of persons per room ...	0.85	0.76

## Population.

The estimated population of the area of the borough at the 30th June, 1955, was 117,400. This is a fall of 1,000 and continues the regular slight downward trend since the census of 1951.

The statistical data throughout this report are based on the mid-year estimate of 117,400.

The estimated mid-year home population of children under 15 years was 26,000.

## Births.

Live births referable to the town amounted to 1,832 representing a birth rate of 15.60 per thousand of the population compared with a rate of 15.00 for England and Wales and a local rate of 15.40 for the previous year. This year sees the first check in the regular downward trend that has prevailed since 1947.

97 illegitimate births were registered during the year, which is a decrease of 5 over the last year and a rate variation from 0.86 to 0.83 per thousand live births.

The mortality rate amongst infants born out of wedlock was 41 per thousand live births.

**Table 3.**  
**Number of Births registered in the various wards.**

Ward	Estimated Population	Births	Rate per 1,000 population
Ashton ... ..	9,960	213	21.4
Avenham ... ..	7,250	166	22.9
Christ Church ... ..	5,370	85	15.8
Deepdale ... ..	16,570	231	13.9
Fishwick ... ..	8,950	138	15.4
Maudland ... ..	10,240	147	14.4
Moorbrook ... ..	7,030	81	11.5
Park ... ..	10,900	135	12.4
Ribbleton ... ..	18,160	312	17.2
St. John's ... ..	9,100	137	15.1
St. Peter's ... ..	8,350	105	12.6
Trinity ... ..	5,520	82	14.9
	117,400	1,832	



**Deaths.**

Deaths referable to Preston amounted to 1,459, equivalent to an adjusted rate of 13.42 per 1,000 of the population as compared with 12.83 last year and with 11.70 for England and Wales.

If death is to be delayed or prevented and social services are to work towards the maintenance of health throughout the full span of life it is necessary to look not only at the factors causing death but the extent to which they operate and the time of their operation.

Table 5 sets out the mean age at death from certain factors and the years of "working life" lost as a consequence of their operating at the significant time.

Among men it will be seen that cancer of the lung tends to cause death at an earlier age than the average and that its abstraction from the population of "working" years of life amounted to no less than 56 per 10,000 of the population. This factor is even more evident in relation to fatal accidents among men where the average age at death is only 49 and as many as 92 years for 10,000 of the population were lost.

Fatal coronary disease is twice as common amongst men and occurs at an earlier age but more women die and earlier than men from vascular lesions of the central nervous system.

Cancer is still the menacing shadow taking heavy toll in the middle years of life. Whilst conversely even tuberculosis is threatening to fall out of the mortality tables since fatal infectious disease is becoming a relative rarity.

**Table 5.**  
**Number of deaths from certain causes, death rates per 10,000 population, mean ages at death,**  
**years of "working life" lost and years of "total life" lost per 10,000 population.**

Cause of Death	PRESTON 1955					ENGLAND & WALES 1954					PRESTON 1954				
	Total Deaths		Mean Age at Death	Years of Life lost per 10,000 population		Total Deaths		Mean Age at Death	Years of Life lost per 10,000 population		Total Deaths		Mean Age at Death	Years of Life lost per 10,000 population	
	Number	Rate per 10,000 population		Ages 15—64	Total to age 85	Number	Rate per 10,000 population		Ages 15—64	Total to age 85	Number	Rate per 10,000 population		Ages 15—64	Total to age 85
All causes ... .. M. F.	766 693	138 114.6	62.2 67.2	863 522	2,882 1,814	259,797 242,099	122 105	65.1 69.4	773 502	2,433 1,644	707 700	126 112	63.4 67.8	759 504	2,610 1,777
Tuberculosis of respiratory system ... M. F.	17 2	3 0.32	57.9 56.5	27 4	78 8	4,944 2,125	2 1	55.2 46.3	25 17	64 33	13 9	2.3 1.4	50.5 48.2	28 23	76 49
Cancer (all sites) ... .. M. F.	128 106	23 17.2	62.4 62.4	123 91	487 317	47,313 42,782	22 19	64.8 65.3	113 96	422 331	122 108	22 17	64.4 63.2	88 85	411 311
Cancer of lung, bronchus ... .. M.	44	8	59.9	56	194	13,995	7	61.7	38	140	32	5.7	59.8	33	132
Cancer of breast ... .. F.	24	3.9	59	30	90	8,361	4	63.0	22	73	17	2.7	54.8	25	71
Vascular lesions of c.n.s. ... .. M. F.	101 127	18 20.5	71.9 68	43 65	263 294	30,516 41,626	14 18	72.1 73.9	31 30	191 194	85 140	15 22	71.2 73.3	39 37	227 256
Coronary disease ... .. M. F.	116 69	21 11.1	65.9 70.8	79 23	375 138	42,387 24,514	20 11	67.4 72.8	71 17	331 114	108 65	19 10	66 70	59 21	321 133
Other cardiac diseases ... .. M. F.	109 163	20 26.3	69.6 75.4	73 29	318 259	41,106 54,829	19 24	74.2 76.3	38 37	243 238	154 203	27 33	69.9 74	64 43	388 336
Bronchitis and Pneumonia ... .. M. F.	113 60	20 9.7	62.8 68.6	117 36	416 140	26,851 17,532	13 8	65.1 68.7	80 44	252 127	85 49	15 7.9	63.6 61.8	90 72	317 178
Ulcer of stomach and duodenum ... .. M. F.	9 4	2 0.65	65.1 61	6 2	29 11	4,011 1,467	2 1	66.2 70.4	8 2	34 9	6 3	1.1 0.5	64 67.3	4 1	20 6
Accidents ... .. M. F.	27 23	5 3.7	49.5 64.7	92 33	177 79	9,275 6,270	4 3	47.0 64.9	85 24	163 56	22 16	3.9 2.6	43.4 60.6	76 28	150 47

(These figures have been compiled according to the method advised by the Registrar General in his Quarterly Return, 30th. June, 1955, page 21. The weights used are therefore those based on 1952-1954 national mortality experience but they are the most up-to-date weights available.





**Table 4.**  
**Causes of Death—arranged according to class, sex and age.**

				0—		1—		15—		65 and over		Total	
				M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
1.	Tuberculosis, respiratory	...	...	—	—	—	—	12	1	5	1	17	2
2.	Tuberculosis, other	...	...	—	—	—	—	—	—	—	—	—	—
3.	Syphilitic disease	...	...	—	—	—	—	—	—	—	—	—	—
4.	Diphtheria	...	...	—	—	—	—	—	—	—	—	—	—
5.	Whooping Cough	...	...	—	—	—	—	—	—	—	—	—	—
6.	Meningococcal Infections	...	...	—	—	—	—	—	—	—	—	—	—
7.	Acute Poliomyelitis	...	...	—	—	—	—	—	—	—	—	—	—
8.	Measles	...	...	—	—	—	—	—	—	—	—	—	—
9.	Other infective and parasitic diseases	...	...	—	—	—	1	1	1	—	1	1	3
10.	Malignant, neoplasm, stomach	...	...	—	—	—	—	10	4	12	13	22	17
11.	„ „ lung,	...	...	—	—	—	—	33	2	11	2	44	4
12.	„ „ breast	...	...	—	—	—	—	—	17	1	7	1	24
13.	„ „ uterus	...	...	—	—	—	—	—	11	—	6	—	17
14.	Other malignant and lymphatic neo- plasm	...	...	—	—	—	—	29	20	30	21	59	41
15.	Leukaemia, aleukaemia	...	...	—	—	—	—	2	2	—	1	2	3
16.	Diabetes	...	...	—	—	—	1	—	—	2	2	2	3
17.	Vascular Lesions of nervous system	...	...	—	—	—	1	21	39	80	87	101	127
18.	Coronary disease, angina	...	...	—	—	—	—	49	17	67	52	116	69
19.	Hypertension with heart disease	...	...	—	—	—	—	2	2	10	13	12	15
20.	Other heart disease	...	...	1	1	1	—	21	14	74	133	97	148
21.	Other circulatory disease	...	...	—	—	—	—	3	9	16	29	19	38
22.	Influenza	...	...	—	—	—	—	1	1	3	3	4	4
23.	Pneumonia	...	...	4	2	—	—	12	2	23	18	39	22
24.	Bronchitis	...	...	1	—	—	—	32	11	41	27	74	38
25.	Other diseases of respiratory system	...	...	—	—	—	—	11	—	8	5	19	5
26.	Ulcer of stomach and duodenum	...	...	—	—	—	—	4	2	5	2	9	4
27.	Gastritis, enteritis and diarrhoea	...	...	1	—	—	—	1	1	—	1	2	2
28.	Nephritis, nephrosis...	...	...	—	—	—	1	8	4	7	9	15	14
29.	Hyperplasia of prostate	...	...	—	—	—	—	—	—	8	—	8	—
30.	Pregnancy, childbirth, abortion	...	...	—	—	—	—	—	2	—	—	—	2
31.	Congenital malformations	...	...	8	6	—	—	—	—	—	—	8	6
32.	Other defined and ill-defined dis- eases	...	...	16	10	—	3	18	16	26	32	60	61
33.	Motor vehicle accidents	...	...	—	—	—	—	8	1	5	1	13	2
34.	All other accidents	...	...	1	2	—	2	10	1	3	16	14	21
35.	Suicide	...	...	—	—	—	—	4	1	3	—	7	1
36.	Homicide and operations of war	...	...	—	—	—	—	1	—	—	—	1	—
TOTALS				32	21	1	9	293	181	440	482	766	693
				53		10		474		922		1459	

**Table 6.**  
**Deaths in Hospitals and Institutions.**

						M	F	
Preston Royal Infirmary...	...	...	...	...	...	176	97	273
St. Joseph's Hospital	...	...	...	...	...	4	14	18
Chestnuts Sanatorium	...	...	...	...	...	3	1	4
Isolation Hospital...	...	...	...	...	...	5	—	5
Bairstow Street Nursing Home	...	...	...	...	...	1	—	1
Willows Convalescent Home	...	...	...	...	...	2	—	2
Hospitals, etc., outside the area...	...	...	...	...	...	151	136	287
Total ...						342	248	590

This figure represents 40.4% of the total deaths. There is a marked disparity between the sexes so far as deaths at Preston Royal Infirmary are concerned, a matter which is probably related to the administrative arrangements of that hospital.

**Table 7.**  
**Deaths in the various wards.**

Percentage of total population		Ashton	Avenham	Christ Church	Deepdale	Fishwick	Maudland	Moorbrook	Park	Ribbleton	St. John's	St. Peter's	Trinity	Totals
		8.48	6.18	4.58	14.12	7.62	8.72	5.99	9.28	15.47	7.75	7.11	4.70	
Under 1 year	...	7	3	2	3	1	7	1	7	12	3	5	2	53
1—2 years	...	—	—	—	—	—	—	—	—	1	—	1	—	2
2—5 years	...	—	—	—	—	—	—	—	—	—	—	—	—	—
5—15 years	...	1	—	—	2	1	1	1	—	—	—	2	—	8
15—25 years	...	—	—	—	1	1	—	2	3	2	—	—	1	10
25—45 years	...	6	3	—	3	2	9	5	8	10	6	6	4	62
45—65 years	...	40	23	15	53	30	31	25	41	58	42	26	21	405
65—75 years	...	35	18	23	40	33	32	42	48	42	37	53	18	421
75 and over	...	61	35	19	48	34	51	30	57	62	33	40	28	498
Total	...	150	82	59	150	102	131	106	164	187	121	133	74	1459



**Table 8.**  
**Comparative Annual Numbers and Rates of Births and Deaths.**

Year	Population	No. of Births	Rate per 1,000 Living	No. of Infant Deaths	Infant Mortality	Maternal Mortality		Rate per 1,000 Births	Total No. of Deaths	Rate per 1,000 Living
						Diseases and P.F.	Accidents Others			
1900	118,902	3,410	28.67	814	236	2	11	3.80	2,636	22.16
1	113,117	3,418	30.21	737	218	12	13	7.31	2,213	19.56
2	113,766	3,278	28.81	618	188	4	10	4.27	1,998	17.56
3	114,404	3,453	30.18	541	156	3	15	5.21	1,955	17.08
4	115,055	3,314	28.26	609	183	5	12	5.13	2,091	17.83
5	115,721	3,259	28.16	490	150	7	12	5.83	1,906	16.47
6	116,399	3,317	28.49	665	200	2	13	4.52	2,065	17.74
7	117,093	3,124	26.68	495	158	1	11	3.84	2,003	17.10
8	117,799	3,309	27.56	516	156	2	11	3.92	1,975	16.45
9	118,519	3,027	25.54	416	137	5	8	4.29	1,721	14.52
1910	119,253	2,812	23.58	438	156	4	7	3.91	1,758	14.74
1	117,216	2,726	23.25	473	173	2	13	5.50	1,984	16.92
2	117,630	2,753	23.40	342	124	1	4	1.82	1,972	16.76
3	118,070	2,888	23.95	462	160	2	6	2.77	2,043	16.98
4	118,514	2,841	23.97	401	141	2	20	7.74	1,873	15.80
5	118,118	2,546	21.48	395	155	5	7	4.71	2,086	18.63
6	119,611	2,315	19.36	254	109	3	3	2.59	1,774	16.14
7	118,993	2,019	16.96	255	124	1	5	2.96	1,660	15.46
8	118,595	1,906	16.07	213	113	2	4	3.15	1,944	18.36
9	122,168	2,086	17.45	225	110	5	4	4.31	1,760	14.72
1920	122,133	2,984	24.43	301	101	9	13	7.37	1,659	13.60
1	119,900	2,811	23.44	316	112	7	8	5.34	1,595	13.30
2	120,900	2,482	20.53	242	97	3	9	4.83	1,662	13.75
3	121,700	2,426	19.11	238	98	3	8	4.54	1,676	13.77
4	123,100	2,328	18.91	225	97	5	8	5.58	1,714	13.92
5	122,900	2,174	17.69	286	131	6	7	3.22	1,787	14.54
6	124,200	2,160	17.39	195	90	8	9	7.87	1,596	12.85
7	127,100	1,892	14.88	206	109	3	6	4.77	1,785	14.04
8	127,100	1,916	15.07	175	91	3	9	6.27	1,614	12.69
9	126,100	1,967	15.60	205	104	4	8	6.10	1,772	14.05
1930	126,100	1,975	15.66	145	73	9	4	6.59	1,554	12.24
1	120,100	1,881	15.66	165	88	5	5	5.32	1,661	13.83
2	118,500	1,764	14.89	149	84	4	6	5.67	1,547	13.05
3	117,800	1,720	14.60	150	87	4	3	4.07	1,577	13.39
4	117,490	1,670	14.24	115	69	6	14	11.97	1,611	15.24
5	116,200	1,742	14.99	140	80	3	5	4.59	1,578	14.94
6	115,200	1,663	14.43	138	83	7	8	8.60	1,624	15.51
7	113,600	1,590	14.00	123	77	2	2	2.40	1,614	15.90
8	113,200	1,766	15.60	125	71	3	—	1.62	1,473	14.44
9	112,800	1,713	15.19	100	58	2	4	3.34	1,535	15.16
1940	108,500	1,711	15.77	157	91	2	10	7.03	1,745	16.72
1	111,490	1,925	17.27	137	71	3	4	3.47	1,543	13.84
2	110,000	1,968	17.89	107	54	2	4	2.94	1,506	13.69
3	109,100	1,952	17.89	132	68	2	2	1.98	1,624	14.89
4	108,190	2,032	18.78	120	59	—	1	0.48	1,386	12.81
5	108,480	1,949	17.97	99	51	1	—	0.51	1,514	13.96
6	114,070	2,380	20.86	134	56	—	4	1.68	1,438	12.61
7	116,520	2,574	22.09	178	69	1	—	0.32	1,578	13.54
8	118,130	2,219	18.78	86	39	1	—	0.44	1,491	12.62
9	119,500	2,170	18.16	94	43	1	—	0.45	1,469	12.91*
1950	120,300	2,101	17.46	68	32	—	—	—	1,550	13.39
1	118,100	1,962	16.61	68	35	—	3	1.49	1,816	15.99
2	119,200	1,960	16.44	63	32	—	—	—	1,453	12.67
3	118,900	1,914	16.10	63	33	—	4	2.04	1,354	11.83
4	118,400	1,823	15.40	50	27	—	1	0.54	1,407	12.83
5	117,400	1,832	15.60	53	29	—	2	1.07	1,459	13.42

\*The death rate from the year 1949 onwards has been adjusted in accordance with the area comparability factor supplied by the Registrar General annually. The figures for earlier years are crude death rates.



### Employment in the Area.

Miss Wilson, Manager of the Local Employment Exchange has provided the following information :—

“Employment in the town’s major industries remained at a high level during the year 1955. The engineering, aircraft and rayon industries continued to expand and considerable progress was made in the housing and schools building programmes. There were difficulties in meeting some labour requirements, particularly those for skilled workers in the engineering and aircraft industries and to a lesser extent in the building industry. The demands for workers in road and rail transport were heavy and resident domestic workers, typists, shop assistants, ward orderlies and cooks for hospital work were in short supply. Special arrangements were made by some employers for women to be employed part-time and although labour generally was fully employed the Exchange Service was successful in recruiting numbers of additional workers for temporary periods of employment ; these included Christmas workers for the G.P.O., students, who took a variety of jobs through the summer vacation and in November approximately 300 men and women who were placed temporarily in employment connected with the Christmas trade.

Unemployment was at a record low level during the greater part of 1955 and the absence of any marked seasonal fluctuation in the number of people wholly unemployed was an indication of the continued prosperity of the town. Uncertainty in the Cotton industry caused some unemployment and as a result the industry lost a number of workers during the year. No serious hardship was caused by this decline in trade however, as most of the workers affected continued to work four days each week, or for those who sought it, other full-time employment was available.

An important aspect of the Ministry’s work was the resettlement of Disabled Persons in employment. During 1955 unemployment amongst disabled people in Preston was happily at a low level ; the average figures for the year showed that of 3,046 adult Registered Disabled Persons only 66 were unemployed, this was a much lower number than the average for the country as a whole and was of course a very small part of the total working population of the Borough. 636 men and women having disabilities of very varied types were assisted in obtaining suitable employment through the Preston Exchange Service.

A feature of the D.R.O’s work, which continued to grow, was with people who, while still recovering from illness or accident, wished to obtain new work without an intervening period of unemployment or others who required guidance to change from an unsuitable occupation into a job which would not aggravate their disability. In 1955 an increasing number of patients were sent to the Exchange by their doctors for advice about obtaining suitable work and the written and verbal guidance about working capacity given by General Practitioners was greatly appreciated by the D.R.Os. Information about medical aspects of disabilities was also obtained from the Ministry of Health, Chest Physicians, Hospitals and the Medical Interviewing Committee. It is pleasing

to notice the increasing co-operation between D.R.O. and doctor and the recognition that resettlement into employment has continued the process of restoring a Disabled Person to his rightful place in the working community. For some Disabled Persons a few weeks at an Industrial Rehabilitation Unit was the means of bridging the gap between illness and industry. Here the Disabled Person recovered confidence and was able to discover what type of work was likely, from all points of view, to be most suitable. During the past year 17 Preston men were sent for courses of rehabilitation.

The Second Report of the National Advisory Committee on the Employment of Older Men and Women was published in December 1955. The importance given to the First Report published in 1953 had been most encouraging and was followed by a greater willingness on the part of employers to engage older people. In Preston there was less tendency to state an upper age limit when notifying vacancies to the Exchange and a greater readiness to accept the suggestion, that an older person might be suitable, has been apparent.

The Nursing Appointments Officer continued to give advice and assistance to persons wishing to take up nursing as a career and to qualified nurses seeking a change of hospital or further training. Close contact was maintained with Youth Employment Officers, Hospital Management Committees and Local Authorities on nursing matters and in order to stimulate the recruitment of nurses, the Mobile Nursing Exhibition visited schools in the area."

**Table 9.**  
**Monthly Unemployed Register, 1955.**

1955	MEN		WOMEN		Total 1955	Total 1954	Total 1953
	Wholly Unemployed	Tempora'ly Stopped	Wholly Unemployed	Tempora'ly Stopped			
January ...	221	10	232	18	481	709	1,506
February...	173	7	258	33	471	704	1,209
March ...	188	2	260	20	470	564	1,028
April ...	178	5	240	22	445	519	1,019
May ...	176	8	210	40	434	531	917
June ...	132	4	198	29	363	482	787
July ...	128	31	155	283	597	355	605
August ...	156	26	189	196	567	379	715
Sept. ...	181	21	173	75	450	423	651
October ...	176	20	171	148	515	372	601
November	158	8	148	10	324	429	494
December	153	7	111	7	278	362	477



Mr. Richardson, the Juvenile Employment Officer, has furnished the following figures in regard to the numbers of juveniles who were unemployed during the year :—

Table 10.								
Number of Unemployed Juveniles.								
Month			Boys		Girls		Total	
			1954	1955	1954	1955	1954	1955
January	...	...	13	21	6	15	19	36
February	...	...	10	7	8	12	18	19
March	...	...	14	6	3	11	17	17
April	...	...	136	31	89	15	225	46
May	...	...	7	8	8	6	15	14
June	...	...	12	5	4	11	16	16
July	...	...	76	38	58	45	134	83
August	...	...	25	39	28	20	53	59
September	...	...	15	27	10	9	25	36
October	...	...	8	16	6	37	14	53
November	...	...	6	3	8	2	14	5
December	...	...	5	4	3	6	8	10



## General Provision of Health Services for the Area.

### I. CARE OF MOTHERS AND YOUNG CHILDREN.

#### Statistics.

1,832 live births were registered during the year, whilst 44 still births occurred.

Domiciliary midwives notified 18% of the total births, 47% were notified from Sharoe Green Hospital and 22% from Preston Royal Infirmary.

The inability to fill the vacancies in the domiciliary midwifery service resulted in a lesser number of domiciliary deliveries as also it reduced the number of requests for investigation into the social circumstances of applicants for admission to hospital for confinement. 23 such investigations were carried out on behalf of Sharoe Green Hospital and 14 in respect of Preston Royal Infirmary. In 15 instances advice was given that reasonable facilities for domiciliary confinement existed.

2 maternal deaths occurred during the year, one from renal necrosis following an abortion and the other from pulmonary infarction in the puerperium.

43 cases of puerperal pyrexia were notified during the year of which 38 came from hospitals. All the patients recovered satisfactorily.

44 still births were notified, 24 from Sharoe Green Hospital, 13 from Preston Royal Infirmary, 3 from St. Joseph's Hospital, 3 from domiciliary practice and one from a private maternity home.

The estimated still birth rate at 24 per 1,000 related births was the same as in 1954.

53 infants under the age of one year died of whom 34 were less than a month old at the time of their death, giving a neo-natal death rate of 18.6 per 1,000 live births as compared with 18 last year.

The infant mortality rate of 28.9 per 1,000 live births compares unfavourably with a figure of 27.2 for the previous year and a figure of 25 for England and Wales as a whole in 1955.

**Table 11.**  
**Infant Deaths.**

Cause	Days				Weeks		Months										Total		
	0—		1- -7		1—4		1 +		2 +		4 +		6 +		9—12				
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
20. Other heart disease ...										1			1					1	1
23. Pneumonia ...			1		1						1	1		1	1			4	2
24. Bronchitis ...														1				1	
27. Gastritis, Enteritis and Diarrhoea ...														1				1	
31. Congenital Malformations ...		2	3		1	3	3			1	1							8	6
32. Other defined and undefined causes ...	6	6	8	2	1			1	1						1			16	10
34. All other accidents ...					1						2							1	2
Total ...	6	8	12	2	4	3	3	1	3	4	1	1	3	2	—	—		32	21

**Clinic Premises.**

3 ad hoc clinics are now in use and the building of a fourth is well on its way to completion at the end of the year. Rented halls continue to be used at Strand Road, Barlow Street, Guttridge, St. Mary Magdalene, Walker Street and St. Mark's.

Dental facilities exist at only one of the combined clinics, namely, Cuttle Street, but cases are now being referred also to the single purpose dental clinics at North Road, Eldon Street and Water Lane.

**Ante natal and post-natal clinics.**

Seven combined ante- and post-natal clinics are held weekly.

Seven hundred and twenty-seven expectant mothers made 3,593 attendances at these clinics compared with 712 and 3,793 in 1954. Further comment is made on this matter in the section headed Midwifery.

Fifty-two patients attended for post-natal examination and advice as compared with 69 in the previous year.

These do not include women attending clinics at the Royal Infirmary and Sharoe Green Maternity Departments.

The consultative ante-natal clinic established in 1954 at Manchester Road continues to be held fortnightly when 233 mothers attended for the first time



and 49 re-attended. It is hoped that ultimately all expectant mothers who propose having their babies at home will be referred to the consultative clinic at least once during the pregnancy.

### **Child Welfare Clinics.**

Ten medical and three non-medical sessions are held weekly at the various centres and one non-medical session is held fortnightly. 24,862 attendances were made by children, this representing a decrease of 1,123 from the year before and coincides with a falling birth rate. Group discussions with parents have been continued in the clinics and film strips used for demonstration purposes. Dressmaking, toy-making and other activities have also been continued at the clinics, two demonstrators attending each child welfare centre one or more times each fortnight.

The ladies of the Preston and District Infant Welfare Voluntary Workers' Association have continued to give their services and to render assistance where necessary at the infant welfare centres.

### **WELFARE FOODS.**

The centre established at the Town Hall continues to sell the standard goods and the following quantities were there distributed :—

National Dried Milk	...	...	...	67,985 tins.
Orange juice	...	...	...	110,319 bottles.
Cod Liver Oil	...	...	...	14,483 bottles.
Vitamins A and D (Tablets)	...	...	...	7,041 packets.

In addition dried milk and other nutrients continued to be sold at the welfare centres and during 1955 a quantity costing £1,970 was handled. The supply of free nutrients cost the Council £45.

### **ANCILLARY THERAPY.**

#### **Dental Treatment.**

Mr. J. C. Knowles, the Senior Dental Officer, has contributed the following report :—

“Treatment of expectant and nursing mothers and pre-school children has been undertaken by all available dental officers at four clinics in widely separated districts. Patients have been referred as before by medical officers but have been instructed and encouraged to attend the respective dental clinics for examination and possible treatment immediately on leaving the medical officer. The object of this arrangement was to reduce as far as possible the leakage between reference by medical officers and examination and treatment by dental officers. The improvement in respect of expectant mothers has been negligible, of nursing mothers fairly good and attendances by children have been almost doubled throughout.



Total time spent has increased by 50% Treatment for mothers shows a slight increase and that for children a considerable increase with extractions slightly reduced and conservative treatment trebled.”

Detailed figures are given in Table 12.

Table 12.								
No. of patients provided with dental treatment and form of treatment given.								
						Expectant and nursing mothers	Children under 5 years	
Examined	...	...	...	...	...	78	203	
Needing treatment	...	...	...	...	...	72	151	
Treated	...	...	...	...	...	62	131	
Made dentally fit	...	...	...	...	...	49	135	
Extractions	...	...	...	...	...	152	184	
Anaesthetics—Local	...	...	...	...	...	9	5	
General	...	...	...	...	...	32	78	
Fillings	...	...	...	...	...	59	126	
Scaling and gum treatment	...	...	...	...	...	23	3	
Silver nitrate treatment	...	...	...	...	...	2	118	
Dressings	...	...	...	...	...	21	32	
Radiographs	...	...	...	...	...	4	—	
Dentures provided—								
Complete	...	...	...	...	...	20	—	
Partial	...	...	...	...	...	23	—	
Dentures re-lined	...	...	...	...	...	3	—	

An equivalent of seven and a half sessions per week are allotted to expectant and nursing mothers and children under school age on the basis of a full establishment of five dentists.

Toddlers’ Clinic.

Toddlers’ clinics continue to be held fortnightly at Cuttle Street, Manchester Road, Barlow Street, Guttridge, St. Mary Magdalene’s, Strand Road and Tulketh Road. Children between the ages of two and five are invited on or about their birthdays to attend for check-up and sufficient time is allowed for each consultation so that the mother and doctor can discuss any difficulties.

3,800 appointments were made during the year and 1,641 children attended, yielding a 43 per cent response.

This response to invitation is remaining fairly constant. The poorest response, as will be seen from Table 13, is got at Strand Road, Cuttle Street and St. Mary’s, Ribbleton.

Table 13 gives details of numbers attending various clinics.

**Table 13.**  
**Toddlers' Clinics, 1955.**

Clinic	No. invited	No. who attended		No. referred for specialist treatment	No. referred for observation
Barlow Street ... ..	630	309	49.0%	55	26
Cuttle Street ... ..	625	234	37.4%	28	4
Deepdale ... ..	517	271	52.4%	101	94
St. Mary's ... ..	450	166	36.9%	8	12
Manchester Road ... ..	450	238	52.9%	43	13
Strand Road ... ..	579	180	31.1%	19	34
Tulketh " Road ... ..	549	243	44.3%	54	44
Totals ... ..	3,800	1,641	43.2%	308	227

**Physiotherapy.**

This service suffered during the year from lack of effective staff. At the beginning of the year clinic sessions were being held regularly at Cuttle Street, Manchester Road, the Open Air School and Tulketh Road, but unfortunately the last named failed to function during the last seven months of the year because of the absence of any physiotherapist.

An equivalent of seven sessions are devoted each week at these four clinics to the care of children under 5 years and the establishment of four physiotherapists was undermanned by one.

**Pre-school children treated.**

<i>New patients</i>	<i>Discharged</i>	<i>Attendances</i>	<i>Sessions held</i>
135	85	3,103	536

In addition weekly sessions are held at Guttridge, Manchester Road, Tulketh Road and Cuttle Street ante-natal clinics to give expectant mothers special instruction in relaxation and suitable exercises to help them in their pregnancy and labour.

**Expectant Mothers Treated.**

<i>New patients</i>	<i>Discharged</i>	<i>Attendances</i>	<i>Sessions held</i>
58	41	240	93

**Artificial Sunlight Therapy.**

This treatment is carried out at Cuttle Street, Manchester Road and the Open Air School.

The figures below show the number of cases dealt with during the year :—

<i>New patients</i>	<i>Discharged</i>	<i>Attendances</i>	<i>Sessions held</i>
80	110	1,569	272

### Ear, Nose and Throat Therapy.

Facilities for the diagnosis and treatment of ear, nose and throat conditions in pre-school children exist through the clinic run as part of the School Health service. The following table gives a summary of the work done :—

New cases ... ..	43
Re-inspections ... ..	61
Referred for—	
Operative treatment...	26
Treatment in clinic ...	9
Re-inspection...	53
X-ray ... ..	5
Audiometry test ... ..	1
Treatment—	
Operative ... ..	74
Clinic ... ..	9
Audiometry tests ... ..	2
Total attendances ... ..	104

### Defective Vision.

Potential squint cases continued to be referred to the special squint clinic and the following table is a record of the work done on pre-school children during the year :—

Number of children under treatment ... ..	79
New cases ... ..	51
Refractions ... ..	60
Re-inspections ... ..	101
Prescriptions given ... ..	7
Referred for—	
Operative treatment...	12
Orthoptic treatment...	1
Total attendances ... ..	152

### Paediatric Clinic.

Twenty-one cases were referred by the medical officers in clinics to the Paediatric Out-patient clinic at the Open Air School for advice or treatment.



### Orthopaedic Clinic.

The following table gives a summary of children referred by the medical officers to the orthopaedic clinic :—

Number of children under treatment	...	...	...	...	80
Total attendances	...	...	...	...	149
X-rays	...	...	...	...	21
Recommended admission to hospital	...	...	...	...	1

#### CLASSIFICATION OF DEFECTS—

Deformities, Congenital	...	...	...	...	21
„ Traumatic	...	...	...	...	2
„ Other	...	...	...	...	32
Rickets	...	...	...	...	23
Paralysis	...	...	...	...	1
Achondroplasia	...	...	...	...	1

### Care of Illegitimate Children.

The Council continued its general arrangements under this heading during the current year and close liaison was maintained with the local Moral Welfare Councils. Two mothers were cared for at Parkinson House, Preston, and one at the Girls' Hostel, Lancaster.

### Care of Premature Infants.

161 Preston babies as opposed to 124 in 1954 were born prematurely in 1955, 124 of those were in hospital or maternity homes and 37 in domiciliary practice. Care of the premature baby in the home continues to rest with the individual midwife under the close supervision of the superintendent midwife until the child attains 6 lbs. in weight.

The following table gives the number of premature infants and their survival state at the end of the month.

**Table 14.**  
**Premature Infants Survival State.**

	Trans- ferred to hospital	Died first 24 hours	Died 2nd— 7th day	Died 8th— 28th day	Sur- vived 28 days	Total
<b>Babies born at home—</b>						
3 lbs. 4 ozs. or less ... ..	—	1	—	—	—	1
Over 3 lbs. 4 ozs. up to and including 4 lbs. 6 ozs. ...	—	—	—	—	3	3
Over 4 lbs. 6 ozs. up to and including 4 lbs. 15 ozs. ...	—	—	—	—	2	2
Over 4 lbs. 15 ozs. up to and including 5 lbs. 8 ozs. ...	—	—	—	—	31	31
TOTAL ...	—	1	—	—	36	37
<b>Babies born in Private Maternity Homes—</b>						
3 lbs. 4 ozs. or less ... ..	—	—	—	—	1	1
Over 3 lbs. 4 ozs. up to and including 4 lbs. 6 ozs. ...	—	—	—	—	2	2
Over 4 lbs. 6 ozs. up to and including 4 lbs. 15 ozs. ...	—	—	—	—	—	—
Over 4 lbs. 15 ozs. up to and including 5 lbs. 8 ozs. ...	—	—	—	—	5	5
TOTAL ...	—	—	—	—	8	8
<b>Babies born in Hospital—</b>						
3 lbs. 4 ozs. or less ... ..	—	7	3	—	7	17
Over 3 lbs. 4 ozs. up to and including 4 lbs. 6 ozs. ...	—	1	1	—	18	20
Over 4 lbs. 6 ozs. up to and including 4 lbs. 15 ozs. ...	—	1	—	1	20	22
Over 4 lbs. 15 ozs. up to and including 5 lbs. 8 ozs. ...	—	—	—	1	56	57
TOTAL ...	—	9	4	2	101	116
GRAND TOTALS ...	—	10	4	2	145	161

Day Nursery Provision.

The Council continues to provide six day nurseries with a total of 263 places and the average daily attendance at the nurseries for the year was 235. The total attendance over the year was slightly less than in the previous year, the main factors attributing to this being the occurrence of dysentery, measles and chickenpox in certain of the nurseries.

Table 15.  
Summary of Statistics, 1955.

			Eldon St.	Fish- wick	Gordon St.	Harting- ton Rd.	lsher- wood St.	Ribble- ton Ave.	Total
Attendances ...	...	...	9,193	7,653	9,729	11,000	11,843	8,260	57,678
New children admitted	...	...	37	76	38	41	48	44	284
Children left ...	...	...	35	77	41	51	53	45	302
On Register—									
January 1st	...	...	47	43	48	53	64	44	299
December 31st	...	...	49	42	45	50	57	38	281
On Waiting List—									
January 1st	...	...	66	5	36	66	41	27	241
December 31st	...	...	56	7	48	41	35	21	208
INFECTION :									
Measles ...	...	...	31	2	—	—	9	6	48
Rubella ...	...	...	—	2	—	—	3	—	5
Chicken Pox ...	...	...	23	—	—	—	4	3	30
Whooping Cough	...	...	—	—	—	—	—	—	—
Mumps ...	...	...	6	9	17	—	—	16	48
Dysentery ...	...	...	12	10	1	14	8	28	73
Scarlet Fever	...	...	1	—	—	—	—	—	1
Gastro-Enteritis	...	...	3	—	13	—	6	2	24
Poliomyelitis ...	...	...	—	—	—	—	—	—	—

Four of the nurseries are recognised training centres for the purpose of the National Nurseries Examination Board Certificate. The course is of two years duration and 21 nursery students were in training, of whom six obtained the certificate.



## II. MIDWIFERY.

At the end of the year 32 midwives were in practice in the town of whom 18 were employed at Preston Royal Infirmary, six at St. Joseph's Hospital, two in private maternity homes and six, including the Supervisor, in municipal domiciliary practice.

The nurses employed in the Council's domiciliary midwifery service, under the supervision of a whole-time non-medical supervisor of midwives, performed 297 deliveries and attended 52 deliveries as maternity nurses.

One woman made no effort to engage assistance and delivered herself unattended of a baby which was found to be dead on its arrival at hospital.

Considerable difficulty has been experienced in recruiting midwives for domiciliary service and only five were so employed at the end of the year. As a consequence, it was not possible to assist materially in relieving the hospitals from the great demand for accommodation exerted on them and it will be seen from Table 6 that the percentage of domiciliary confinements dropped to 19, the lowest figure since the introduction of the National Health Service in 1948.

The hospitals' and general practitioners' staffs co-operated actively in maintaining an efficient service through the difficult period. The general arrangements for the ante-natal supervision of expectant mothers has been extended so that the doctor on whose list the patient is receives at the eighth month a full clinical report of the medical supervision hitherto carried out. Even though he may not have been engaged for the confinement, if he is called in in an emergency he will already have been aware of the circumstances of the case.

All the midwives are qualified to administer gas and air, and the six gas and air analgesia outfits which are available were used in 292 deliveries. Five hundred and sixteen accouchement outfits were provided during the year. Medical aid in accordance with rule E (12) of the Central Midwives Board was sought in 18 cases.

Three auto-cycles are provided for the use of midwives in performance of their duties.

Table 16.

Total confinements and distribution of these confinements between hospitals and nursing homes, general practitioners and midwives for eight years since 5th July, 1948, and attendances at Corporation clinics.

Year	Hospital confinements	Domiciliary confinements	Total confinements	% domiciliary confinements to total	DOMICILIARY CONFINEMENTS				CLINICS			
					MIDWIVES		MATERNITY NURSES		No. of persons who attended	Total No. of attendances at clinics	Average attendance of each person	Ratio of persons attending to total domiciliary confinements
					Number attended	% of total domiciliary confinements	Number attended	% of total domiciliary confinements				
1	2	3	4	5	6	7	8	9	10	11	12	13
1948 (from July)	829	270	1,099	24.57	172	63.7	98	36.3	222	690	3.11	82%
1949	1,639	574	2,213	25.94	350	61.0	224	39.0	777	2,994	3.85	135%
1950	1,669	487	2,156	22.59	323	66.3	164	33.7	602	2,798	4.53	124%
1951	1,530	454	1,984	22.88	302	66.5	152	33.5	620	3,023	4.88	137%
1952	1,511	508	2,019	25.16	321	63.3	186	36.7	667	3,311	4.97	132%
1953	1,454	548	2,002	27.37	424	77.6	122	22.4	770	3,891	5.05	141%
1954	1,422	487	1,909	25.50	366	75.2	120	24.7	712	3,793	5.16	146%
1955	1,527	350	1,877	19.18	297	84.9	52	14.9	727	3,593	4.94	208%

**Table 17.**  
**Place of delivery of Preston mothers during 1955.**

Place of confinement	Available beds	No. of Preston deliveries
Domiciliary ... ..	—	350
Sharoe Green Hospital ... ..	52	894
Preston Royal Infirmary ... ..	50	427
St. Joseph's Hospital ... ..	21	166
Maternity homes ... ..	6	34
Other hospitals ... ..	—	6
Others ... ..	—	—
Totals ... ..	129	1,877

These figures of deliveries relate only to women normally domiciled in Preston and the hospitals undertook a large amount of obstetric work for the surrounding areas also.

### III. Health Visitors.

At the end of the year there were 21 trained health visitors on the staff including a superintendent and her deputy. In addition there was one whole-time tuberculosis visitor and one venereal diseases social worker. The establishment of 32 was partly filled by the employment of 6 clinic nurses undertaking duties relating to immunisation in addition to clinic work associated with the school health service.

Under the assisted training scheme two students started their course of training in September. The prospect of obtaining a full complement of trained health visitors remains poor.

Table 18 sets out in statistical form the number and nature of visits carried out by health visitors during 1955.



**Table 18.**  
**Domiciliary Health Visiting.**

Number of visits to :								Year 1955
Births (first visit) ... ..	...	...	...	...	...	...	...	1,874
Births (re-visits) ... ..	...	...	...	...	...	...	...	11,288
Stillbirths ... ..	...	...	...	...	...	...	...	41
Children 1—5 years, 1st visits	...	...	...	...	...	...	...	95
re-visits	...	...	...	...	...	...	...	19,085
Expectant mothers (first visits)	...	...	...	...	...	...	...	362
Expectant mothers (subsequent visits)	...	...	...	...	...	...	...	577
Persons suffering from illness, 0—5 years	...	...	...	...	...	...	...	75
5—15 years	...	...	...	...	...	...	...	62
15+	...	...	...	...	...	...	...	120
Infectious diseases ... ..	...	...	...	...	...	...	...	868
Special visits ... ..	...	...	...	...	...	...	...	796
Infant death investigations	...	...	...	...	...	...	...	47
Visits to elderly, sick and infirm persons	...	...	...	...	...	...	...	2,222
Tuberculosis domiciliary visits	...	...	...	...	...	...	...	1,714
Total number of visits ... ..								39,226

The field of activity of the health visitor has widened considerably in recent years and a good deal of time is now being spent on the social care of the sick, the infirm and the aged.

The assistance provided to both the hospital and general practitioner in controlling the admission of patients to the inadequate number of chronic sick beds appears to be appreciated if only by the relative absence of complaint and freedom from friction that has prevailed since the health visitors began their social investigations and reports a year or two ago.

Again there is increasing direct contact by some practitioners with health visitors over individual cases where the help of the visitor in the home is of value. It has been possible to give more active consideration to the reports of overcrowding of families and at least in some areas of the town some concentration of effort on difficult families has been possible.

#### **IV. Home Nursing.**

There is a staff of one matron, one deputy matron and 17 district nurses engaged in home nursing. A home is provided where the matron, deputy matron and three of the staff reside, the remainder working on a non-resident basis. Nine autocycles are provided for the use of the nurses to cover their districts adequately and bicycles are provided for those who prefer them. The service is available at the request of the general practitioners between the hours of 8 a.m. and 10 p.m. daily and emergency calls are undertaken overnight.

As residential accommodation is no longer desired by the staff consideration is being given to the reorganisation of the service on a non-residential basis with the closing down of the nurses' home as such.

<b>Table 19.</b> <b>Summary of the work of the District Nurses.</b>								
	No. of cases at beginning of month	New cases	Terminated				No. of cases at end of month	No. of visits
			Conv.	Hosp.	Died	Other causes		
January ...	343	259	166	25	29	8	374	5,450
February ...	374	263	203	20	23	13	378	4,839
March ...	378	214	146	24	38	5	379	5,410
April ...	379	270	140	25	19	8	457	5,059
May ...	457	131	101	21	25	4	437	5,524
June ...	437	165	100	26	30	3	443	4,785
July ...	443	142	99	23	15	5	443	5,290
August ...	443	126	92	19	15	3	440	5,188
September ...	440	140	89	17	22	11	441	5,140
October ...	441	140	88	14	15	12	452	5,520
November ...	452	190	97	20	32	9	484	5,398
December ...	484	149	107	20	16	16	474	5,919
Total for year	—	2,189	1,428	254	269	97	—	63,522

The demand for the services of district nurses appears to have stabilised itself as will be seen from Table 20.

<b>Table 20.</b> <b>Visits paid by district nurses in each of the past five years.</b>		
Year	New visits	Total visits
1955	2,189	63,522
1954	3,155	59,559
1953	3,652	64,527
1952	3,110	64,792
1951	3,424	60,745
1950	3,077	63,994

Table 21.							Cases of Infectious Disease and complications of pregnancy visited during the year by district nurses.	
							Number	Visits
Pneumonia (all forms)	...	...	...	...	...	...	60	527
Tuberculosis	...	...	...	...	...	...	99	733
Influenza	...	...	...	...	...	...	11	56
Scarlet Fever	...	...	...	...	...	...	1	10
Abortions	...	...	...	...	...	...	11	54
Mastitis	...	...	...	...	...	...	27	245
Thrombosis	...	...	...	...	...	...	3	31
Pyrexia	...	...	...	...	...	...	3	24
							215	1,680

Ambulance Service.

At the end of the year the fleet consisted of one Austin ambulance, two short wheel based Bedford ambulances, three long wheel based Bedford ambulances, a utility Bedford sitting case vehicle and three seven-seater Bedford sitting case vehicles.

During the year it was decided that there was a need for the proportion of sitting case vehicles to be increased over that of ambulances and in accordance with this policy two new Bedford sitting case vehicles were purchased, and one ambulance and the Rover car were disposed of.

The increase in the mileage and journeys during this year has not been so marked as in previous years and the position is now more stabilised.

The staff consists of a station officer, three telephonists and twenty-two driver-attendants and one attendant.



Table 22.  
Ambulance Service—Record of journeys made and mileage covered.

MONTH	BOROUGH											
	1950 Mile- age	1950 Jour- neys	1951 Mile- age	1951 Jour- neys	1952 Mile- age	1952 Jour- neys	1953 Mile- age	1953 Jour- neys	1954 Mile- age	1954 Jour- neys	1955 Mile- age	1955 Jour- neys
January ...	7,661	1,622	8,944	1,992	8,620	1,970	10,327	2,365	11,029	2,791	12,535	3,198
February ...	6,848	1,603	7,898	1,719	9,065	1,910	9,188	2,283	10,349	2,688	10,688	2,743
March ...	8,095	1,904	8,484	1,899	8,820	1,811	9,994	2,492	11,092	2,697	11,925	2,928
April ...	7,627	1,638	9,359	1,958	8,614	1,605	9,342	2,293	10,272	2,474	11,110	2,619
May ...	7,686	1,791	8,297	1,887	9,007	1,856	9,341	2,337	11,087	2,932	11,807	2,805
June ...	8,061	1,731	9,060	1,946	9,171	1,802	10,048	2,543	11,486	2,757	11,403	2,923
July ...	8,461	1,958	8,988	1,774	9,598	1,819	9,717	2,438	11,792	2,581	11,987	2,589
August ...	7,765	1,676	9,157	1,625	9,250	1,836	10,325	2,431	11,627	2,789	12,114	2,760
September ...	7,994	1,498	9,394	1,654	8,764	1,854	10,375	2,471	11,080	2,787	12,440	2,852
October ...	8,917	1,615	9,059	1,796	10,129	2,323	11,165	2,687	11,471	2,574	11,576	2,704
November ...	8,427	1,877	7,659	1,784	9,401	2,367	10,873	2,738	13,153	2,963	10,442	2,661
December ...	8,401	1,781	8,561	1,914	9,751	2,630	10,957	2,714	12,460	3,165	10,914	2,738
	95,943	20,694	104,860	21,948	110,190	23,783	121,652	29,792	136,898	33,198	138,941	33,520

70 journeys involving 880 miles were made for Lancashire County Council and 25 journeys involving 555 miles for other authorities.

## **VI. Prevention of Illness, Care and After-Care.**

### **1. Tuberculosis.**

The general arrangements for tuberculosis prevention and care are reported under the heading "Tuberculosis" on page 60.

### **2. Convalescent Treatment.**

In 1955, two men, fourteen women and one child were sent to various homes for convalescent treatment.

### **3. Domiciliary Meals Service.**

This service, whereby persons recovering from illness or in a low state of health have been able to receive a hot meal delivered in their home has been continued throughout the year.

Table 23 shows the scope of the service during 1955.

<b>Table 23.</b> <b>Invalids' and Infirm Persons' Meal Service.</b>				
Number of persons receiving meals on 1.1.55	Number of new recipients during year	Number of persons ceasing to have meals during year	Number of persons remaining at 31.12.55	Total Number of meals served during year
109	184	145	148	12,624

### **4. Night Attendant Service.**

This service, inaugurated in 1951, was continued during 1955 under the supervision of the Home Help Organiser. Run on similar lines to the home help service it is designed to relieve the burden on, and give respite to, relatives and friends of invalids who cannot be left on their own with safety.

During the year 32 cases were assisted and at the end of the year there were five night attendants.

### **5. Provision of Nursing Equipment and Apparatus.**

General nursing equipment and apparatus are provided by the St. John Ambulance Association. This association has for years past had a comprehensive well-stocked nursing equipment section available to everyone in the town. Its service has been supplemented directly by the Corporation by the provision of



beds and bedding, bed linen, nightwear, bed blocks, fracture boards, support boards and other similar forms of equipment which may be needed to meet the requirements of a patient being nursed at home.

## **6. Laundry service.**

From time to time circumstances arise whereby a patient ill at home is unable to arrange for laundering, either by relatives or neighbours or through a commercial laundry, of the bed and personal linen and facilities are provided at the Corporation laundry for dealing with such linen. The need is small in extent and is most commonly met with in the case of elderly people living alone where linen has not only to be lent but also laundered.

## **7. Health Education.**

The Council contributes to the funds of the Central Council for Health Education whose resources are available for health propaganda purposes.

The professional staff of the department are during the course of their everyday work giving help and advice directly or indirectly on every aspect of health.

The officers of the Central Council for Health Education came to Preston early in the year and gave a two-day course on "Human Relations" under the auspices of the Preston Corporation. This course was attended by almost the whole of the professional staff of the department, including doctors, health visitors, midwives, district nurses, sanitary inspectors and welfare staff. Some eighty people attended in all mostly at all the available sessions.

The course centred mainly on drama in health education using human relationships as the basis for the plots and the students actively wrote the stories and acted out the playlets on to a tape recorder, a method which gave every student an opportunity to participate.

The playing of unfinished dramatic incidents to groups which it is wished to educate is invaluable as they are eager to supply the ending and to discuss the reasons for their answer and the major difficulty with groups is to get them started talking.

This course gave a stimulus to the staff particularly at the maternity and child welfare clinics and throughout the year in addition to the individual education given to each mother whilst talking to her alone many group discussions were held at each of the centres.

Later in the year a lecture and film show was given in collaboration with the North Western Gas Board on "Clean Air" to a selected audience of citizens of Preston whose opinions would carry weight in this field.

Various other members of the staff gave talks and lectures to outside groups.

Displays using material from the Central Council for Health Education are regularly shown in the various clinics and in the display window at 48 Lancaster Road.



## 8. Problem Families.

The following short note has been prepared by Dr. Melville who has been actively associated with the care and supervision of problem families in Preston.

During the year thirty-two families have been reviewed at the meetings of the liaison committee. Twenty of these had been under consideration before and twelve new cases were brought to the notice of the committee. Amongst these new cases five after investigation were considered to be families with a problem which could be dealt with satisfactorily by a single organisation and each family was transferred to the appropriate social unit.

Of these five, three were simple housing problems, in one the husband had gone off the rails temporarily in maintaining his family and one had stopped paying rent in protest against alleged unattended disrepair.

Three families were removed from the list because it was felt that they were sufficiently rehabilitated. Two of these had been dealt with successfully by visiting, advising and exhorting over a fairly long period. The third family had been right down, husband in gaol for debt, wife sharp tongued and abusive, children not well cared for although not physically neglected. This family after occupying temporary accommodation at the Civic Hostel for over two years were given accommodation elsewhere where they could live in a flat as a family. There, over a period of two years they improved steadily and markedly, paid their debts, lived reasonably and looked after their children and are now rehoused successfully in a council house.

Two other families consisted of mothers with illegitimate children and eventually in both cases failure had to be admitted and the children taken into care.

Of the remaining twenty-two families eight are borderline problem family cases where by continuous visiting the situation is kept steady and it is felt that they are just coping but that the slightest set-back would put them right in the category.

In two cases the children are not neglected but there is a social problem which has not been easy to solve, e.g. alcoholic father, epileptic mother. Two cases are still under preliminary investigation. The remaining families, ten all told, are problem families in the full sense of the word.

Of these ten five have been known since the committee started to work. Three of these have shown no improvement whatever. In two of them there is an intelligent psychopathic mother and a weak father and in the third a psychopathic father and a weak and mentally retarded mother although it must be said that in this third family the father has improved in so far as he has worked much more consistently in this last eighteen months and the children are obviously fed reasonably although on all other counts the situation is unimproved.

The other two families are the two discussed in the 1954 report. The first family has improved slightly and it is now felt that the mother has gained some basic knowledge of housecraft and can be driven to using it—but it requires constant drive.

The second family has made very considerable progress, the man and wife are more adult and mature and it is hoped that they will shortly get a house and will only require a little supervision.

This leaves five cases which have come to light within recent months. Two are of the same type as mentioned above, psychopathic reasonably intelligent mothers and weak fathers. Two other families have a psychoneurotic and physically incapacitated mother and efforts are being made to have these dealt with medically, and the fifth is a dull mother whose husband is in prison. She can be kept reasonably up to the mark by constant supervision, which she gets.

This work seems most unrewarding but on reflection must be worthwhile as it is felt that without the buttress of the social workers several of these families would by now have been split up permanently.

**VII. Domestic Help Service.**

This service is supervised by a domestic help organiser and the staff consists of 75 part-time home helps. The service is aimed at giving help in the home where circumstances make it difficult or impossible for the family to manage without assistance. Priority is given to maternity cases, elderly infirm and chronic sick, and cases of sudden acute illness in the home.

An average of 437 cases were assisted each month by this service and the amount of time given to each case varied from three hours to eight each day.

This service, combined with the night attendant service and the meals and laundry services helps materially to keep the infirm at home and leave beds in hospital and other institutions for even needier cases.

Each application for aid is investigated, an assessment of time required is made, the degree of priority determined and the charge to be paid fixed. The maximum charge is at present 2s. 8d. per hour and reduced payments in accordance with a prescribed scale may be demanded. The minimum charge made is 4s. per week.

Whilst in theory any of the home helps can go to any case, in practice home helps undertake particularly certain types of cases and tend to be utilised for the type best suited to their ability and temperament.

<b>Table 24.</b>				
<b>Domestic Help Service.</b>				
1955	Existing	New	Terminated	No. being assisted at the end of the month
January ... ..	430	28	14	444
February ... ..	444	18	36	426
March ... ..	426	23	22	427
April ... ..	427	18	19	426
May ... ..	426	15	14	427
June ... ..	427	15	18	424
July ... ..	424	20	24	420
August ... ..	420	42	26	436
September ... ..	436	21	5	452
October ... ..	452	16	31	437
November ... ..	437	17	2	452
December ... ..	452	32	13	471



## 9. Cerebral Palsy.

No complete record of the incidence of cerebral palsy in the town is available but there is fairly complete information regarding children of school age compiled from school health sources, whilst some of the more severe adult cases are registered and known through the welfare services section.

The cases actually known to the staff are recorded in the table below :—

Table 25.								
No. of known cases of cerebral palsy and epilepsy.								
Ages			Cerebral palsy			Epilepsy		
			Males	Females	Total	Males	Females	Total
—5	...	...	5	3	8	2	2	4
5+	...	...	10	5	15	3	8	11
10+	...	...	5	4	9	10	7	17
15+	...	...	7	3	10	7	3	10
20+	...	...	7	7	14	7	5	12
30+	...	...	3	1	4	3	8	11
40+	...	...	—	—	—	1	4	5
50+	...	...	2	—	2	4	5	9
60+	...	...	—	—	—	—	1	1
70+	...	...	—	—	—	—	1	1
Total	...		39	23	62	37	44	81

Voluntary registration of any condition depends for its success on the apparent benefit to be obtained by the persons invited to co-operate. In the case of children of school age and under, registration is fairly complete for not only are the cases ascertained at routine clinical examinations but diagnosis, supervision and care are all available through the orthopaedic and paediatric clinic facilities and the special cerebral palsy unit at the Open Air School at which last year seven cases were in attendance at the end of the year. Since the orthopaedic and paediatric consultants hold clinics at the school and are regularly in consultation the care of these cases, medical, social and educational, is fully co-ordinated.

In the case of adults a small number of cases of the more severe type have been registered through the welfare services section. Occupational therapy in the home is provided for cases whose spatial movements are severely restricted and three men and one woman are doing handicrafts at home, whilst a weekly half-day session is held at the social centre for persons suffering from crippling defects. One man aged 19 was attending at the close of the year.

Close co-operation exists with the youth employment officer and the disablement rehabilitation officers of the Ministry of Labour, both as to training for industry and placement. Seven men are employed in open industry and two undertake casual work on their own account. Two women are engaged in open industry. One woman is engaged in gold thread embroidery working in her own home for a local firm.



## **10. Epilepsy.**

Epilepsy is a condition which even in the absence of treatment varies considerably in severity from case to case. Records are kept in register form only of the more severe types in which some form of care or regular supervision is required. 81 cases were on the register at the end of the year.

Of the 28 schoolchildren affected three are in special residential schools and four attend the Open Air School. 4 also suffer from mental deficiency of such a degree as to bring them within the ambit of the Mental Deficiency Acts.

Amongst the adult population epilepsy comes to notice as a rule only when assistance is sought to overcome some social need. There is a difficulty from time to time in getting residential accommodation as a matter of urgency though eventually cases have all been placed.

Four men are in epileptic colonies and five men also suffering from mental deficiency are in mental deficiency institutions. Correspondingly six women are in colonies and three in mental deficiency institutions.

Contact is also maintained with the Youth Employment Officer in respect of juvenile epileptics and advice given on the most suitable forms of employment.

Four men and three women are employed in open industry. One man is employed in a sheltered workshop and one woman does casual work. One woman attends the social centre for handicraft training.

Visitation, where it is not declined, is undertaken regularly by the district health visitor.

## **VIII. MENTAL HEALTH.**

### **1. Administration.**

The committee arrangements for the control of the mental health service remained unchanged as does the staff establishment. The female mental health visitor resigned during the year and was replaced by another woman holding a social science diploma and having several years practical experience gained in a similar post with another authority. The arrangements were continued whereby members of the Occupation Centre staff are assisted in attendance at the full-time course of training held in Manchester by the National Association for Mental Health and one member resumed duties at the centre in August after obtaining the diploma whilst another took up training in September.

At the request of the National Association for Mental Health practical training of students attending their Manchester course is now provided at the Preston Occupation Centre. Two students undertook the full training course at Preston during the year and one student attended for the one week's preliminary observation course.

With the regular attendance of the psychiatric social worker at the hospital out patient clinics and the frequent staff case work conferences a much closer supervision is being maintained over cases in attendance at the psychiatric out-patient clinics and it is hoped a better service of help provided.

At the request of medical superintendents 11 mental defectives on licence from hospitals were supervised by the mental health visitors.

## ACCOUNT OF WORK UNDERTAKEN IN THE COMMUNITY.

### Lunacy and Mental Treatment Acts.

121 notifications were dealt with during 1955 as follows :—

	<i>Males</i>	<i>Females</i>
Three-day orders ... ..	4	1
Fourteen-day orders ... ..	45	60
Summary reception orders ... ..	4	7

Of the 110 cases admitted under three- or fourteen-day orders 12 males and 8 females were subsequently retained under Summary Reception orders, 21 males and 37 females remained in hospital as Voluntary patients, and 1 female as a temporary patient.

Under the Mental Treatment Act 1930, 61 males and 81 females were admitted to hospital as voluntary patients and 1 male and 1 female as temporary patients.

During the year 47 males and 91 females discharged from hospital were supervised by the Mental Health staff by arrangement with the general practitioners and the patient, also 7 males and 52 females were visited at the request of the Consultant Psychiatrist or the general practitioner, 1,057 visits being paid for this purpose.

### Mental Deficiency Acts, 1913-1938.

(1) New cases to the extent of 11 males and 16 females were reported during the year. The number of defectives on the authority's register at the end of the year was 469, as follows :—

	<i>Males</i>	<i>Females</i>
Voluntary supervision ... ..	16	27
Statutory supervision ... ..	148	112
Statutory guardianship ... ..	2	—
In hospital ... ..	95	69
	<hr/> 261	<hr/> 208

### Domiciliary Care.

597 visits of supervision were made by the mental health staff, whilst 109 investigations regarding home and social conditions were made and reports submitted to medical superintendents in respect of patients detained under order in the following mental hospitals :—

Allerton Priory ... ..	2	Gillibrand Hall ... ..	1
Brockhall ... ..	20	Lisieux Hall ... ..	28
Calderstones ... ..	40	Newchurch ... ..	4
Granage Hall ... ..	2	Royal Albert ... ..	7
Durran Hill ... ..	1	St. Mary's Home ... ..	2
Greaves Hall ... ..	1	Swinton ... ..	1
			<hr/> 109



**Occupation Centre.**

The Occupation Centre at “The Elms” had its first full year of functioning and the high standard of care that has been achieved has been the subject of favourable comment from many sources.

The centre now functions for the practical training of students in attendance at the diploma course of the National Association for Mental Health.

The centre has been organised in four groups, the nursery group of younger children, two middle groups, one of higher intellectual capacity, and a fourth group consisting mainly of older boys.

Meals are provided daily, being cooked at the nearby Civic Hostel and transported in containers to the centre.

Transport to and from “The Elms” is also provided for certain of the pupils in attendance at the centre.

Table 26 sets out the number of cases under instruction at the centre during the year.

Table 26.																
Pupils in attendance at the Occupation Centre during 1955.																
	No. of cases under instruction on 1.1.55				No. of new cases admitted during the year				No. discharged				No. on Register on 31.12.55			
	Under 16 yrs.		Over 16 yrs.		Under 16 yrs.		Over 16 yrs.		Under 16 yrs.		Over 16 yrs.		Under 16 yrs.		Over 16 yrs.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
County Borough ...	11	9	4	4	6	6	0	1	0	3	2	0	15	10	4	7
County Council ...	6	6	3	3	4	8	0	0	4	2	2	1	6	11	1	3
	17	15	7	7	10	14	0	1	4	5	4	1	21	21	5	10

**IX. Domiciliary, Medical, Pharmaceutical, Dental and Ophthalmic Services.**

I am indebted to Mr. Leyland, Clerk to the Preston Executive Council, for the following statement on the medical, pharmaceutical, dental and ophthalmic services administered by the Preston Executive Council :—

**“General Medical Services.**

The number of patients registered on doctors’ lists at 31st March, 1956, was 118,339. Medical services were provided by 68 practitioners, 54 of whom were resident in the Borough, and 60 of whom were also included in the Council’s obstetric list for the provision of Maternity Medical Services.



## DESCRIPTION OF MATERNITY MEDICAL SERVICES PROVIDED.

Number of patients receiving complete services	...	...	486
Number of patients receiving ante-natal services only	...	...	158
Number of patients receiving post-natal services only	...	...	24
Number of cases in which doctor attended confinement	...	...	342

The total gross payments for general medical services for the year was £133,777 1s. 6d. including £4,203 10s. 10d. for maternity medical services.

**Pharmaceutical Services.**

On the 31st March, 1956, there were 55 chemists' establishments on the Council's Pharmaceutical List for the supply of medicines and appliances, and 19 contractors for the supply of appliances only. The Council's Rota Service Scheme providing for establishments in different parts of the town to be open for one hour each evening after the normal hour of closing, and one hour each Sunday, Local and Bank Holiday, continued to operate satisfactorily throughout the year.

During the year 29 test prescriptions were taken, all of which were satisfactorily dispensed.

Payments made by the Council for the supply of medicines and appliances amounted to £164,923 10s. 4d. including £858 9s. 0d. for Rota Services.

Charges paid by patients towards this part of the Service amounted to £25,313 15s. 6d. 801,240 prescriptions were dispensed by chemists during the year.

**General Dental Services.**

At the end of the year there were 41 Dental Practitioners on the Council's Dental List. The total cost to the Council for the supply of dental appliances, extractions, and conservative treatment was £112,386 4s. 0d., the charges paid by patients towards such treatment amounted to £28,943 18s. 3d.

**Supplementary Ophthalmic Services.**

At the 31st March, 1956, there were 3 Ophthalmic Medical Practitioners, 20 firms of Ophthalmic Opticians, and 2 firms of Dispensing Opticians on the Council's Ophthalmic List. 22,489 applications for glasses were received during the year, as compared with 20,416 the previous year. Of the number of Sight Tests provided, 18,056 cases were supplied with glasses under the National Health Service. Applications for repair or replacement of glasses totalled 1,225, of which 1,099 were approved. The total cost to the Council for this branch of the service was :—

	£	s.	d.	£	s.	d.
Sight Testing Fees	...	...	...	16,071	7	6
Supply and repair of glasses	...	...	...	44,835	10	1
Less paid by patients	...	...	...	22,569	5	6
Net amount paid by Council	...	...	...	£38,337	12	1"

# 10. PATHOLOGICAL AND LABORATORY SERVICE.

There is close co-operation with the Group Laboratory in the investigation into outbreaks of infectious disease and general epidemiological problems. A record of the work done on behalf of the department is given in the table below :—

						UNITS OF WORK	
						Ministry of Health	
						Circular 86/47,	
						19th May, 1947.	
						<i>Public Health</i>	<i>V.D.</i>
						<i>Dept.</i>	<i>Dept.</i>
Bacteriology	...	...	...	...	...	21,452	—
Chemistry	...	...	...	...	...	634	—
Inoculations	...	...	...	...	...	3,000	—
Serology	...	...	...	...	...	—	5,172
						<hr/> 25,086 <hr/>	<hr/> 5,172 <hr/>

## National Assistance Acts, 1948 and 1951.

### Removal to suitable premises of persons in need of care and attention.

Action necessitating the removal of two persons in need of care and attention was taken during the course of the year.

Prevalence and Control over Infectious Disease.

Not much variation, from the pattern described last year, took place in the field of infectious diseases. Whooping cough subsided abruptly almost to vanishing point, scarlet fever was at a relatively low ebb and the measles epidemic of the autumn and winter of 1954 petered out in the early months of 1955. The bowel infections remained numerous in quantity and mild in character whilst poliomyelitis was present for the summer three months. Tuberculosis continued its downward trend to reach new low levels, but infective hepatitis was present throughout the year to a noticeably increased extent. Comment on these matters is made in the succeeding pages under the heading of each disease.

Table 27 gives incidence of notifications grouped according to year and disease.

Table 27  
Number of notifications grouped according to year and disease.

DISEASE	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955
Smallpox ... ..	—	—	—	—	—	—	—	—	—	—
Diphtheria ... ..	41	5	4	2	—	1	—	—	—	—
Scarlet Fever ... ..	138	130	218	247	299	382	407	516	156	152
Measles ... ..	505	1821	1715	564	741	1157	1757	302	1531	759
Whooping Cough ... ..	299	140	298	187	432	303	329	246	245	17
Pneumonia (Primary and Influenzal) ... ..	81	89	83	101	76	104	57	46	65	53
Acute Encephalitis ... ..	—	—	—	—	4	3	1	—	—	—
Acute Poliomyelitis ... ..	1	17	1	3	5	5	2	35	1	11
Cerebro Spinal Fever ... ..	—	4	2	3	3	—	6	—	—	1
Typhoid Fever... ..	—	—	—	1	—	—	1	1	—	1
Paratyphoid Fever ... ..	—	—	—	7	—	6	—	—	—	1
Dysentery ... ..	4	3	55	28	265	147	86	258	376	189
Food Poisoning ... ..	—	—	—	9	31	36	31	353	48	51
Erysipelas ... ..	14	17	26	25	27	9	5	17	13	7
Tuberculosis, Pulmonary ... ..	134	103	104	107	100	111	114	100	72	61
Tuberculosis, Non-Pulmonary ... ..	21	17	23	22	38	31	20	30	21	13
Puerperal Pyrexia ... ..	30	17	13	18	15	17	8	33	38	43
Ophthalmia Neonatorum ... ..	1	7	8	3	2	5	—	3	2	5
Malaria ... ..	—	—	—	—	—	1	—	—	—	1



Table 28 gives the cases notified during the present year arranged according to disease and age at notification.

**Table 28.**  
**Notifiable Infectious Diseases (excluding Tuberculosis)**  
**occurring during the year, showing age grouping, degree of**  
**hospitalisation and mortality.**

DISEASE	CASES NOTIFIED													TOTAL	Cases admitted to hospital	DEATHS
	Under 1	1—2	2—3	3—4	4—5	5—10	10—15	15—20	20—35	35—45	45—65	65 and over	Age unknown			
Scarlet Fever ... ..	1	7	8	10	17	91	17	1	—	—	—	—	—	152	112	—
Measles ... ..	27	116	114	119	106	256	4	—	5	1	1	—	10	759	25	—
Whooping Cough ... ..	2	4	3	3	3	2	—	—	—	—	—	—	—	17	1	—
Acute Pneumonia (Primary and Influenzal)	3	4	4	1	3	5	2	2	2	1	14	12	—	53	8	61
Puerperal Pyrexia ... ..	—	—	—	—	—	—	—	1	33	9	—	—	—	43	38	—
Erysipelas ... ..	—	—	—	—	—	—	—	—	1	—	4	2	—	7	—	—
Dysentery ... ..	18	28	26	12	12	27	7	5	10	8	12	5	19	189	5	—
Cerebro Spinal Fever ... ..	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—
Acute Anterior Poliomyelitis and Polioencephalitis	1	1	1	—	1	2	1	—	4	—	—	—	—	11	10	—
Ophthalmia Neonatorum ...	5	—	—	—	—	—	—	—	—	—	—	—	—	5	1	—
Food Poisoning ... ..	3	—	1	1	1	5	4	1	10	4	12	1	8	51	8	—
Typhoid Fever ... ..	—	—	—	1	—	—	—	—	—	—	—	—	—	1	1	—
Paratyphoid Fever ... ..	1	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—
Malaria ... ..	—	—	—	—	—	—	—	—	1	—	—	—	—	1	—	—
	62	160	157	147	143	388	35	10	66	23	43	20	37	1291	210	61

### Smallpox.

No case of smallpox occurred in the borough during the year and no case arrived at the port. The last definite cases in Preston occurred in 1929. There was little direct trading with ports in areas where smallpox is endemic, the only danger area being North Africa from which there arrived two ships.

The low primary vaccination rate is of some concern and an attempt to improve the position was made in the latter half of the year by the introduction of a scheme whereby written parental consents, the partially completed record cards and printed appointment letters are sent to the family doctors concerned. The task of each doctor is thus limited to posting the appointment letter in which he has inserted a date of his choice and after vaccination completing and returning the vaccination record card. This attempt to relieve the family doctor of the burden of clerical work has met with only modified success. Some practitioners obviously find the scheme helpful, others are vaccinating the infants and omitting to return the record cards whilst a third group are taking no action at all.

**Table 29.**  
**Vaccination against Smallpox.**

Age at 31st Dec., 1955, i.e., born in year	Under 1 1955	1—4 1951—1954	5—14 1941—1950	15 or over before 1941	Total
Number vaccinated ...	529	66	20	24	639
Number re-vaccinated ...	2	—	—	14	16
Total ... ..	531	66	20	38	655

### **Diphtheria.**

For the fourth year in succession there has been no case of diphtheria in the borough. This fact underlines the value of artificially acquired active immunity which is being lost in the case of the disease discussed in the preceding paragraph.

Last year comment was made that the figure of 79.2 per cent. of the population under 15 who had been immunised was a pleasing feature in view of some national alarm at the drop in immunisation figures and this year the percentage of those under 15 who have been immunised is 78.17, a drop of 1 per cent. This continued high rate of immunisation is due in very great measure to the enthusiasm of the health visiting staff in seeking out and persuading parents of the value of immunisation and the co-operation and good will of the general practitioners, many of whom are now carrying out immunisation procedure as a routine service to their patients.

Table 31 shows that 53.37 per cent. of children under 5 years were recorded as having completed a full course of immunisation. This increase of over 3 per cent. is particularly pleasing and as was stated last year, is certainly lower than the actual figure because of incomplete notification.

Clear evidence of the incompleteness of notification is available from the follow up by health visitors of infants born in Preston during 1952.

Out of 1960 births occurring in that year, 1480 were visited during 1955 of whom 1132 were found to have been immunised against diphtheria, that is 76.5 per cent. of the number interviewed. Table 30 shows that formal records of immunisation exist in respect of 1093 children born in that year, that is 56 per cent. of the number born.

There is undoubtedly much unaccounted immunisation being carried out and the diphtheria immunity index in Preston is in fact appreciably higher than the very satisfactory figures in Table 31 indicate.

In recent years persistent regular immunisation of school entrants has been the practice. An appreciable number of hitherto unimmunised children are picked up at this time as will be seen from Table 30 and very large numbers of other children receive boosting doses of antigen. As a consequence the numbers of children between five and fifteen who can be considered to have a satisfactory immunity state has increased steadily from a figure of 80.9 per cent in 1950, to one of 91.07 per cent. in 1955.

Table 30 shows the extent of primary immunisation carried out annually since 1942 and takes no account of subsequent re-immunisation by boosting doses.



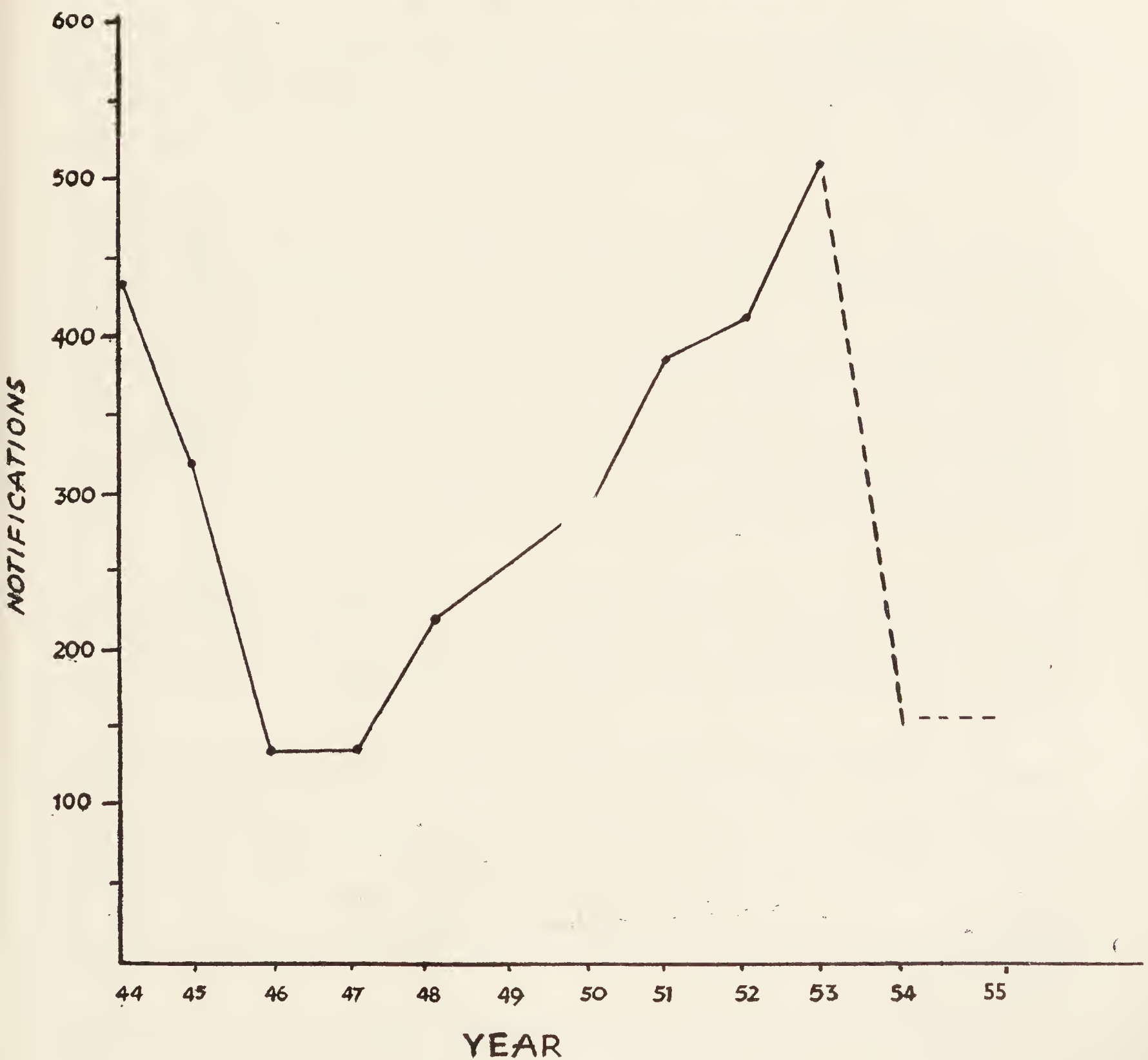
Table 30.  
Number of children receiving a full primary course of immunisation

	Y E A R   O F   B I R T H															
	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	Total
Annual Births	1925	1968	1952	2032	1949	2380	2574	2219	2170	2101	1962	1960	1914	1823	1862	
1942	734															734
1943	358	608														966
1944	101	284	485													870
1945	47	81	222	368												718
1946	180	82	137	289	587											1275
1947	53	72	99	107	299	878										1508
1948	36	117	172	97	121	369	1284	141								2337
1949	13	28	174	137	69	93	259	1130	131							2024
1950	7	4	29	118	61	27	77	120	885	83						1411
1951	12	3	6	35	141	55	30	39	189	893	116					1519
1952	218	5	6	14	31	188	85	50	72	168	834	99				1770
1953	147	194	6	3	9	41	152	27	30	57	150	692	122			1630
1954	7	26	101	—	3	11	33	166	95	64	86	225	929	178		1924
1955	1	2	67	4	2	3	9	13	123	84	40	77	179	824	199	1627
Total	1914	1506	1504	1172	1323	1665	1929	1686	1525	1349	1226	1093	1230	1002	199	20323
YEAR DIPHThERIA IMMUNISATION COMPLETED																

Table 31.										
Diphtheria immunisation.										
Immunisation in relation to Child Population.										
Number of children who had completed a full course of immunisation at any time up to 31st December, 1955.										
Age at 31st December, 1955, <i>i.e.</i> , Born in year	...	...	Under 1 1955	1 1954	2 1953	3 1952	4 1951	5—9 1946—1950	10—14 1941—1945	Total Under 15
Number Immunised	...	...	199	1002	1230	1093	1226	8154	7419	20323
Estimated Mid-year Population, 1955	...	...			Children under 5 8900			17100		26000
Percentage Immunised : Sectional Group—Mid-year Popln.					53.37			91.07		78.17

**Scarlet Fever.**

Scarlet fever was almost entirely absent from the town until the last quarter of the year when an outcrop of cases occurred. In all 152 cases were notified of whom 112 enjoyed the luxury of a stay in the isolation hospital. No person has died in Preston from scarlet fever in the past ten years.

**INCIDENCE OF SCARLET FEVER 1944-1955.**



## Measles.

The normal epidemic appearing in the autumn of 1954 carried on until July, 1955.

The numbers involved in this epidemic totalled 2,269 of whom 735 were notified in the first seven months of 1955. A total of 759 cases occurred throughout the year amongst whom no death took place.

## Whooping Cough.

In recent years when reasonably accurate statistics have been available it is apparent that whooping cough epidemics have occurred in Preston at intervals of about twenty months with moderate endemicity prevailing between. In each epidemic wave about 350 cases are notified of whom 70-75 per cent. are under 5 years of age. A few deaths occur, as many as 4 under two years of age being reported in 1946.

In the autumn of 1952, the launching of a mass immunisation scheme was decided upon, using the Glaxo combined diphtheria pertussis prophylactic. This decision was taken after much thought since it was imperative that nothing be done that would in any way impair the efficiency of the excellent diphtheria immunisation arrangements already prevailing and paying high dividends. Against the idea of a combined vaccine were the suggestions that the diphtheria antigenic response would be weakened and that the optimal age for whooping cough immunisation, namely, 2 months, was inimical to diphtheria immunisation the optimal time for which was not younger than 6 months. Against these doubtful assertions could be set the undoubted disadvantage of excessive inoculations in each child plus the great advantages to be gained by the telescoping of two campaigns into one.

The combined prophylactic originally was administered beginning at 9 months of age, but more recently administration is starting at 6 months. The first batch of immunisations was completed in January, 1953, and the scheme has gone on uninterruptedly since until at the end of 1955, 41 per cent. of the children under 5 years are known to have been immunised.

The accompanying histogram sets out the notification picture since 1946, together with the extent of immunisation in the under 5 years group. It will be seen that the normal epidemic occurred in 1953-54 was of approximately the usual magnitude and was succeeded by a short period of four months when a few notifications persisted each month, after which the disease practically disappeared and during 1955 only seventeen notifications have been received. If the usual pattern of epidemiology had developed, then an epidemic should have appeared in the summer of 1955, and the autumn and early winter months should have seen 300-400 cases.

Clearly the ordinary forces of invasion have been resisted and it is tempting to assume that the specific resistance has come from the intensive immunisation work carried out by the public health medical staff and by the many general practitioners who have shown an active interest in the campaign and from the immunity naturally acquired by many during the 1953-54 epidemics.

Table 32.  
Whooping Cough Immunisation.

Number of Children receiving a full primary course of immunisation.

YEAR WHOOPING COUGH IMMUNISATION COMPLETED																
	YEAR OF BIRTH															
	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	
Annual Births	1925	1968	1952	2032	1949	2380	2574	2219	2170	2101	1962	1960	1914	1823	1832	Total
1945			2	1												3
1946				1	2	1										4
1947	1		3	38	73	77	10									202
1948		2	2	5	19	35	46	4								113
1949			1		5	20	76	66	13							181
1950				1	4	5	16	27	54	15						122
1951					1		3	21	53	87	22					187
1952						3	8	8	17	62	101	45				244
1953				1	3	1	11	32	66	121	193	750	131			1309
1954					2	4	11	28	33	48	85	172	813	173		1369
1955						2	1	7	61	32	31	47	126	773	187	1267
Total	1	2	8	47	109	148	182	193	297	365	432	1014	1070	946	187	5001

No death has occurred during the past three years and here it may well be that the increasing use of antibiotics both in the treatment of the disease and its complication has had an important influence.

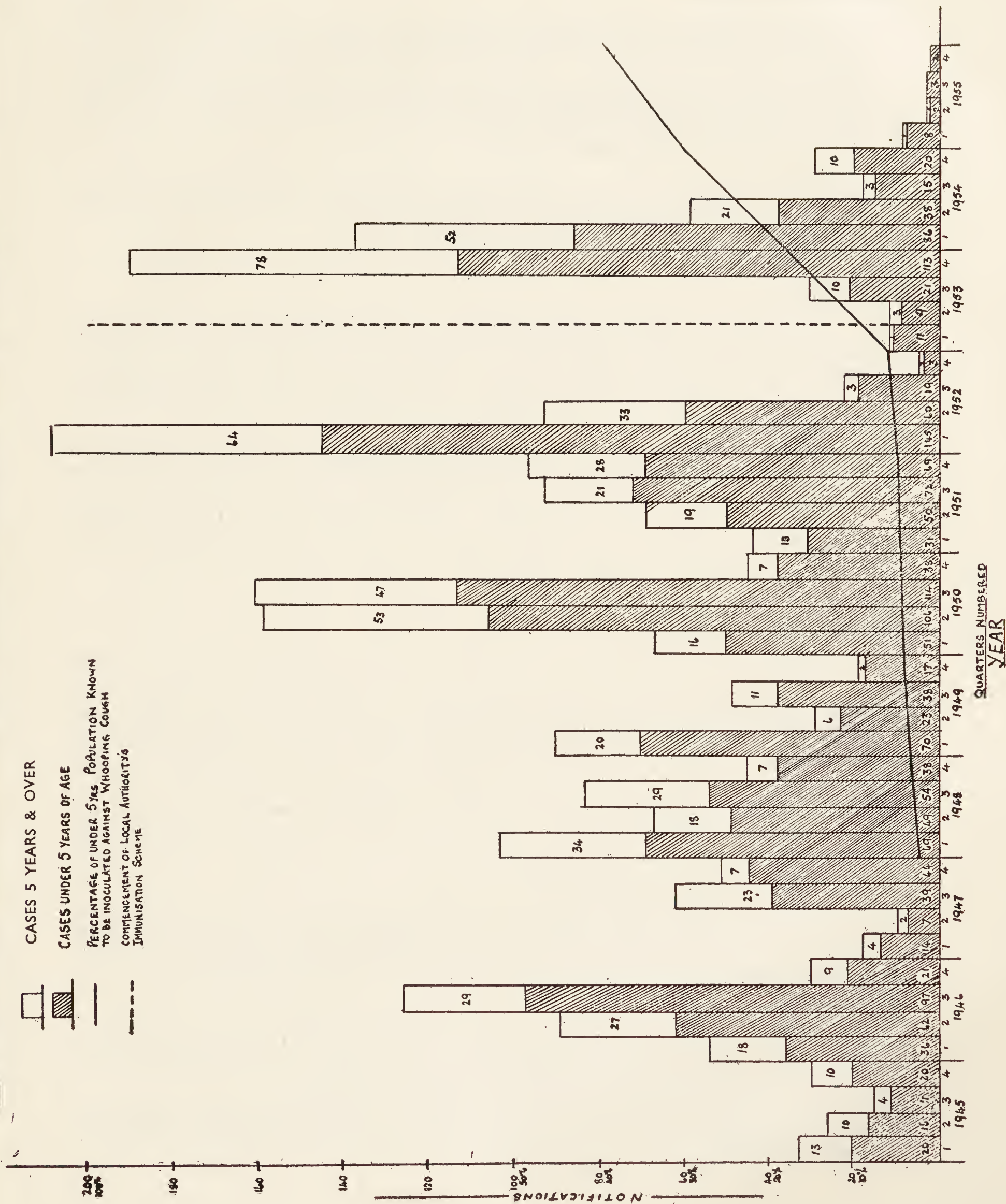
The attack rates for children under 5 years are shown in Table 33 and though the numbers have shrunk to a level that permits little in the way of statistical assumption to be made it will be seen that the attack rate in the immunised is still less than the record low rate achieved in the general under 5 years population.

Whether whooping cough has been successfully repelled remains to be seen, but with immunisation going on actively in the adjacent county districts, also the portents seem very hopeful and certainly the same pattern of incidence has been maintained in the early months of 1956.

<p><b>Table 33.</b></p> <p>Notifications and Attack Rates of Whooping Cough in Children under 5 years of age.</p>						
Year	Estimated population	Total notifications of whooping cough	Attack rate per 1,000 of group population	Number of immunised children	Notified previously immunised cases	Attack rate per 1,000 immunised
1946	9,370	212	22.6			
1947	9,563	120	12.5			
1948	9,830	221	22.5			
1949	10,060	144	14.3			
1950	10,480	307	29.3			
1951	10,190	220	21.6			
1952	9,700	227	23.4			
1953	9,400	151	16.06	1,730	3	1.7
1954	9,200	160	17.5	2,818	7	2.5
1955	8,900	15	1.7	3,649	5	1.4



# WHOOPING COUGH NOTIFICATIONS - 1945-1955 (inclusive) in quarters





### **Anterior Poliomyelitis.**

Poliomyelitis returned again to the town in 1955, the first definite case having its onset in June. A total of eleven definite cases was ascertained between June and September. The cases were fairly well scattered throughout the town and no clear association could be established between them. A notable feature was the relative mildness of the illness, eight of the eleven cases failing to demonstrate even temporary paresis.

Age at onset of illness varied between five months and 32 years, four of the cases being under 5 years, three being of school age and four between 24 and 32 years of age. No death occurred from the disease.

### **Enteric Fever.**

One case of typhoid fever and one of paratyphoid fever were notified during the year. The typhoid fever occurred in a young child of 3 years in October. The disease was confirmed bacteriologically and serologically but no source of infection could be traced. The salmonella typhi isolated belonged to Vi. phage type A.

The paratyphoid was that of a child of 7 months, notified in December. Again the disease was confirmed bacteriologically but no source of infection could be traced. No other member of the family had any symptoms and all had negative findings bacteriologically. Although this child was only 7 months he was given titbits of almost every article of food eaten by the adults in the house.

### **Dysentery.**

189 cases, all attributable to the sonné strain of organism, were notified.

Each of the six day nurseries suffered an outbreak during the year. Prophylactic treatment with sulphaguanidine and streptomycin in association with vigorous measures of hygiene were imposed as soon as the medical staff became aware of the trouble. Where immediate action was possible, the mean number of cases was 10 with maximum and minimum of 11 and 9 respectively. In two instances, however, three and more weeks had elapsed between the onset of the first case and notification and in both instances the incidence was considerably higher, namely, 31 and 38 cases respectively. The majority of cases in this second nursery arose in early 1956.

There were 203 notifications altogether of gastroenteritis, diarrhoea and dysentery and 160 of these came from two practices of six practitioners. There is no doubt that notification of dysentery is poor and that a considerable amount of the disease is not notified and indeed because of its mildness is not seen by doctors.

This disease, the notification rate of which has risen generally throughout the country each year is not usually serious, but must be a considerable source of chronic ill health, loss of efficiency and working time.

The universal practice of the elementary principles of hygiene is the sure and only method of prevention and education of the public in these principles is the key factor.

## Food Poisoning.

51 cases of food poisoning were notified during the year, 31 of these were isolated single cases and no definite food could be established as the vehicle of infection.

19 of these cases were due to the salmonellae, 13 to salmonella typhimurium, 4 to salmonella anatum and one each to salmonella newport and salmonella dublin. One other was caused by staphylococcus and in the remaining eleven cases no organism was isolated.

The remaining 20 cases occurred in five distinct outbreaks. Two of these outbreaks were due to the Clostridium Welchii, one each to the staphylococcus and salmonella typhimurium and in the fifth the organism was not isolated.

One of the outbreaks attributed to the clostridium welchii occurred in six members of one family who ate meat and potato pie prepared the evening before and eaten reheated for lunch the following day. Two of these pies were made at the same time and the organism was isolated from the remains of one pie. The evidence in this case pointed to the meat being contaminated before cooking but no other cases of customers at the same butchers were found and all investigations at the butcher's shop drew a blank.

The other outbreak of clostridium welchii again involved a single family three members of whom were affected. In this case the vehicle was apparently brown bread remains of which was found to contain the organism which was also isolated from the three affected persons. No other cases were found and investigations at the bakehouse were negative.

An outbreak involving 3 persons where the organism was identified as staphylococcus aureus (phage type 42E) occurred in July. Four young adults took sandwiches with them containing tuna fish made up by the mother of the one of the party unaffected. The organism was isolated from the faeces of the three cases, the unaffected fourth man, in the nasopharynx of his mother and in the discarded tin of tuna fish.

The sandwiches were made at midday and carried by these people for six hours on a hot day and eaten about 6 p.m. the average interval from consumption to onset of illness was three hours and one girl was severely affected.

In this outbreak, there seemed no doubt of the organism, of the vehicle and of the source, the food handler's nasopharynx. The delay in consumption of the contaminated sandwiches on a hot day gave ample time for the production of toxin.

The outbreak subsequently found to be due to salmonella typhimurium occurred on the 3rd and 4th September, when six cases were ascertained. All of the cases had eaten the products of one particular bakery. In the subsequent investigation the same organism was isolated from faeces of staff and from working surfaces at the bakery. This organism was very persistent and before it was eradicated had been isolated from seven of a staff of twenty and was also isolated from five other home contacts of one of the staff. Only one of the staff and one of the home contacts had any symptoms and these occurred after each had a positive stool and some time after the beginning of the outbreak. It was also isolated on three occasions from the working surfaces of the bakehouse. One of the cases became a persistent carrier and some two months after outbreak he was admitted to hospital with perforation of the ileum and peritonitis.

By intensive cleansing and rigorous exclusion of carriers and contacts, it was possible to give this bakery a clean bill only at the end of ten weeks.



The fifth outbreak involved two members of one household but there was some evidence that another family outside the borough was also involved. The vehicle suspected in both families was shrimps bought from the same shop. Subsequent investigations at the shop were all negative and no organism could be incriminated. The incubation period was about twenty hours and the predominant symptoms were abdominal pain and diarrhoea lasting from one to four days.

**Infective hepatitis.**

In June, information was received about a number of cases of infective hepatitis and subsequently a number of practitioners sent in particulars of other cases occurring in their practices. From these and other sources forty-eight cases came to light and it is likely that a good many other cases have not been reported.

The disease for the time being appears to be endemic in the area to an extent appreciably greater than would be expected. The 5-10 years age group is mainly involved but this may be due to the fact that information concerning school children is fairly readily obtained and the Ribbleton, Deepdale areas were principally affected although Fishwick, St. Johns, Avenham and Christchurch were also involved.

The illness was generally, but not always mild in character.

Cases are still being discovered regularly and the position is being closely watched.

**Tuberculosis.**

Formal notification of a diagnosis of tuberculosis was received in respect of 74 persons as opposed to 98 last year. Table 34 shows the site affected together with the age group of those involved.

Table 34.														
Age periods	FORMAL NOTIFICATION													
	No. of Primary Notifications of new cases of Tuberculosis													Total All Ages
	0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-	
Respiratory, Males ... ..	—	—	—	1	—	1	1	10	9	11	2	2	1	38
Respiratory, Females ... ..	—	—	—	2	3	6	1	7	3	—	—	1	—	23
Non-Respiratory, Males ... ..	—	—	—	1	—	—	3	1	1	—	—	—	—	6
Non-Respiratory, Females ... ..	—	—	—	—	1	2	1	—	2	1	—	—	—	7

In addition to the above notifications the deaths of three males not previously notified were registered as due to tuberculosis. The total deaths from tuberculosis during the year were 19 so that 16 per cent. of the cases dying from tuberculosis presumably had not previously been so diagnosed and were an unrecognised risk to the rest of the community.

Notification of tuberculosis has become very lax in recent times and an appreciable number of cases have been notified by the chest physicians in the absence of response from the family doctors.

Table 35 gives the number of persons classified according to sex and site of disease on the tuberculosis notification register at the end of the year together with the number of cases removed from the register and the reasons therefor.

**Table 35. Notification Register.**

	Respiratory			Non-respiratory			Total Cases
	Male	Female	Total	Male	Female	Total	
Number of cases of Tuberculosis remaining on the 31st December, 1955, on the Register of Notifications kept by the Medical Officer of Health ...	385	266	651	93	90	183	834
Number of cases removed from the Register during the year by reason, <i>inter alia</i> , of :—							
1. Withdrawal of notification ... ..	2	2	4	1	—	1	5
2. Recovery from the disease... ..	16	9	25	7	5	12	37
3. Deaths (all causes) ...	13	2	15	—	—	—	15
4. Outward Transfers ...	3	3	6	—	—	—	6
5. Otherwise (Lost sight of, etc.) ... ..	5	6	11	—	2	2	13

In the light of the present efforts to control and ultimately exterminate tuberculosis as a human affliction the trends of notification and mortality are of some interest.

Table 36 gives the notification and death rates for both respiratory and non-respiratory disease since 1930.

Table 36. Tuberculosis.									
Population	Year	No. of cases notified		Rates per 1,000 population		No. of Deaths		Rates per 1,000 population	
		Respiratory	Non-Respiratory	Respiratory	Non-Respiratory	Respiratory	Non-Respiratory	Respiratory	Non-Respiratory
126100	1930	150	97	1.19	.77	100	25	.79	.20
118839	1931	133	84	1.12	.71	82	21	.69	.18
118500	1932	116	65	.98	.55	89	21	.75	.18
117800	1933	96	67	.81	.57	89	10	.76	.08
117490	1934	133	48	1.13	.41	85	14	.72	.12
116200	1935	96	44	.83	.38	70	12	.60	.10
115200	1936	131	44	1.14	.38	68	12	.59	.10
113600	1937	121	49	1.07	.43	77	19	.68	.17
113600	1938	103	44	.91	.39	69	19	.61	.17
112800	1939	95	27	.84	.24	73	15	.65	.13
108500	1940	104	47	.96	.43	63	8	.58	.07
111490	1941	110	43	.99	.39	68	22	.61	.20
110000	1942	133	46	1.21	.42	79	12	.72	.11
109100	1943	138	39	1.26	.36	74	18	.68	.16
108190	1944	129	38	1.19	.35	56	10	.52	.09
108480	1945	114	39	1.05	.36	54	21	.50	.19
114070	1946	134	21	1.17	.18	52	12	.46	.10
116520	1947	103	17	.90	.15	59	5	.51	.04
118130	1948	104	23	.88	.19	66	10	.56	.08
119500	1949	107	22	.90	.18	48	9	.40	.08
120300	1950	86	29	.71	.24	35	7	.29	.06
118100	1951	97	27	.82	.23	41	5	.35	.04
119200	1952	103	19	.86	.16	27	1	.23	.01
118900	1953	82	29	.69	.24	26	1	.22	.01
118400	1954	79	19	.67	.16	22	1	.19	.01
117400	1955	61	13	.52	.11	19	—	.16	—



## **Prevention of illness, care and after care as applied to Tuberculosis.**

Last year attention was drawn to the trend of events in tuberculosis incidence and mortality and as will be seen from Table 36 the downward gradient continues in both cases with new record low levels being achieved throughout.

There is no doubt that, given a continuance of favourable conditions, tuberculosis is a vanishing disease here, though the experience of the war years is a sharp reminder of the ease with which a reversion of the trend can take place.

In these favourable conditions intensified effort to eliminate the scourge entirely should be undertaken. With confirmed new cases numbering no more than six per month the task of finding a source of infection and of secondary cases is undoubtedly less formidable and the more often such sources of infection are traced the quicker can control measures be applied.

### **Prevention of illness.**

Active search amongst contacts of known cases has been carried out at the chest clinics and 811 contacts were examined of whom five were diagnosed as suffering from tuberculosis.

311 tuberculin tests at toddlers' clinics were performed and only 3 positive results obtained. In all three instances B.C.G. vaccination had been carried out in infancy.

4 per cent. of the total visits done by the health visitors during the year were done in respect of tuberculous households. 97 were first visits on notification of a case of tuberculosis and 1,617 were follow-up visits. The health visitor carries out a most important function here in an educative and advisory capacity.

The majority of this work is done by one health visitor appointed for the purpose, but all of them have to do this periodically and where there are young children in addition to tuberculous patients in the household, the health visitor for the district supplements the advice given by the tuberculosis visitor.

In addition, a health visitor is in attendance at the chest clinic, with the chest physician, and 219 attendances were made during the year.

A mass radiography survey of the general population was carried out in the first few months of 1955 by the staff of the Regional Hospital Board.

### **B.C.G. Vaccination.**

Vaccination was carried out in accordance with the approved scheme as in 1954, with a very similar response from the population as will be seen from Table 37.

It was found convenient to spread the work over each school session instead of carrying it all out in the last quarter of the year, and post vaccination testing was carried out as before.

The test results obtained in the first part of the year were entirely orthodox but later results revealed a surprisingly high rate of apparent failure to convert following vaccination whilst the prevaccination negative reaction rate also rose.

The attention of the Ministry of Health was drawn to the position and further tuberculin tests both with the Protein Purified Derivative normally supplied and with a separate supply of Old Tuberculin were carried out with the ready active collaboration and advice of Professor Heaf, the Ministry's advisor on tuberculosis, who twice visited Preston. The Ministry of Health has since made arrangements for fresh tuberculin to be issued for national use and the old stocks have been withdrawn.

In addition to the vaccination carried out on school leavers, 116 tuberculin negative contacts of cases were vaccinated by the Chest Physician.

<b>Table 37.</b>								
<b>B.C.G. Vaccination of thirteen-year-old school children</b>							1954	1955
1.	Estimated population	...	...	...	...	...	1,416	1,607
2.	No. of consents	...	...	...	...	...	1,040	1,204
	Percentage consenting of population	...	...	...	...	...	73.0	74.9
3.	No. tuberculin tested	...	...	...	...	...	925	1,037
	Percentage tested of population	...	...	...	...	...	65.3	64.5
4.	No. of tuberculin positives	...	...	...	...	...	249	253
	Percentage positive reactors to tuberculin tested	...	...	...	...	...	26.9	24.4
5.	No. of tuberculin negatives...	...	...	...	...	...	675	784
	Percentage of negative reactors to tuberculin tested	...	...	...	...	...	73.0	75.6
6.	No. vaccinated	...	...	...	...	...	675	784
	Percentage of vaccinated to total population	...	...	...	...	...	47.6	48.8
7.	Percentage of positive reactors to total population	...	...	...	...	...	17.6	15.7
8.	Percentage of population not dealt with (all reasons)	...	...	...	...	...	34.7	35.5
9.	No. of vaccinated who were tuberculin negative at 6 weeks	...	...	...	...	...	4	184

Care and After Care.

The night sanatorium arrangements have remained unchanged during the year. Six cases were admitted and four discharged, the average length of stay being 120 days. All of the beds were occupied at the close of the year.

Close co-operation has been maintained with the local staff of the Ministry of Labour in relation to the employment of the tuberculous. During the year 19 men and 14 women were placed in employment by the disablement rehabilitation officers, 3 were trained under the vocational scheme and one received a course of industrial rehabilitation at Egham.



## **Milk.**

There was maintained during the year the system of providing to the tuberculous, milk as a dietary additive and 57 persons received supplies free or at reduced prices.

## **Nursing and Ancillary Equipment.**

A full range of equipment for the domiciliary care of the sick is available on loan or otherwise and has been drawn upon as required.

---

The Chest Physician, Dr. W. Griffel, has kindly contributed the following note :—

“ Notable advances in the treatment of tuberculosis, both by the newer drugs and by thoracic surgery, have been mainly responsible for the surge of new interest in this preventable disease.

The Chest Physician is now in company of the Paediatrician, Gynaecologist and other Specialists, all of whom are aware of the new avenues of treatment.

The General Practitioner is now taking active part in the treatment of the patient before admission and after discharge from sanatorium or hospital. His co-operation in the discovery of the earliest stage of infection—manifest by the positive skin tuberculin test—should be now our aim. Tuberculin testing is now, after the introduction of the Heaf's test (practised by us since 1950) a relative simple procedure and we feel that the time has come for the General Practitioner to use this test as widely as possible and to inform the Chest Physician of any child or adolescent, who has a positive skin reaction to tuberculin.

A positive tuberculin test focuses our attention not only on the individual, but on his environment which is responsible for the conversion from a negative reactor to a positive one and makes it our duty to find the source of infection.

Only if each case of tuberculin conversion can be traced to its source and the source itself eliminated, isolated and treated effectively can and will the incidence of tubercular disease drop to insignificance.

This method of case finding becomes more and more important as the number of positive reactors decreases in a community and it seems that we are in this country now for the first time in this epidemiological phase of tuberculosis.”



Treatment of Scabies and Verminous Heads.

Ellen Street and Cuttle Street continue to be used as centres for cleansing, particularly heads.

Table 38 gives details of treatment given.

Table 38.									
		ELLEN STREET				CUTTLE STREET			
		Scabies		Verminous Heads		Scabies		Verminous Heads	
		Cases	Treatments	Cases	Treatments	Cases	Treatments	Cases	Treatments
Men	...	1	1	—	—	—	—	—	—
Women	...	4	6	13	13	—	—	1	1
Boys (under 14)	...	13	21	239	249	—	—	92	92
Girls (under 14)	...	3	5	2287	2293	—	—	1526	1527
TOTAL	...	21	33	2539	2555	—	—	1619	1620

Venereal Disease.

The arrangements in relation to the control of venereal disease remain unchanged. Some rise took place in the number of new cases first attending the clinic at Preston Royal Infirmary, the new cases of gonorrhoea increasing from 34 in 1954 to 60 in 1955, a large part of this increase occurring in the quarter ending September. 21 new cases of syphilis attended, as compared with 18 cases in the previous year. No case of congenital syphilis in an infant occurred this year.

Social work continues to be carried out by the same worker stationed at the clinic at Preston Royal Infirmary and acting directly under the control of the consultant. Over 200 follow-up letters were sent out with about 50 per cent. effective results and some home visits were paid with a certain degree of success.

Routine enquiry continues to be made on all ships by the port sanitary inspector and generally speaking seamen do not hesitate to make enquiries regarding treatment. 43 seamen were seen at the clinic during the year as opposed to 51 in the previous year.

## Sanitary Circumstances of the Area.

### 1.—Water.

Preston water is all obtained from upland gathering grounds at an elevation exceeding 500 feet above sea level : the area is chiefly of a moorland character. In the Forest of Bowland Estates, having an area of 6,775 acres, there are six intakes abstracting the waters of the Langden and Hareden Streams and their tributaries. Of these, Langden is the largest and Hareden the next in size followed by Losterdale Intake where immediate chlorination is effected, and three smaller ones constructed under the parliamentary powers obtained in 1947. In addition, there are two intake works gathering water from the southern side of Longridge Fell. All the water is soft and well suited for all domestic and industrial purposes.

The whole of the foregoing supplies converge upon the four large storage reservoirs in the neighbourhood of Longridge, and, after decanting through these reservoirs, the water passes on to Grimsargh, where it is strained through fine-mesh copper cloth, which removes the coarser materials in suspension and chlorinated before entering the mains to Preston.

A large new storage reservoir is in the process of construction at Spade Mill and is intended to augment the available storage to meet periods of drought.

The Water Engineer has supplied the following additional information with regard to 1955.

(a) The water supplied to this area has been satisfactory, both in quality and quantity.

(b) 347 bacteriological examinations of the raw water were made including 68 of the water as supplied to consumers. A copy of the latest analysis is appended.

**Table 39.**  
**Results expressed in Parts per Million.**

Total Solid Residue (Dried at 180° C.)	...	...	...	...	...	60.0
Oxygen required to oxydise in 15 minutes	...	...	...	...	...	0.38
Oxygen required to oxydise in 3 hours	...	...	...	...	...	0.96
Ammonia—Free and Saline	...	...	...	...	...	0.072
Ammonia—Albuminoid	...	...	...	...	...	0.078
Nitrogen as Nitrates	...	...	...	...	...	0.20
Chlorides	...	...	...	...	...	12.0
Temporary Hardness	...	...	...	...	...	Nil
Permanent Hardness	...	...	...	...	...	42.0
Total Hardness	...	...	...	...	...	42.0
pH Value	...	...	...	...	...	7.1
Physical properties	...	...	...	...	Colour 11 Hazen, Odourless	

(c) The raw water has occasionally slight plumbo-solvent action, but the continuous addition of lime to the supply neutralizes the risk in this direction and the average pH figure for the supply is 7.2.

(d) No action was necessary in respect of contamination.

(e) The number of dwellinghouses supplied within the area of direct supply is 36,687 and of houses and shops (combined) 3,417. The population supplied in these houses is 122,000 with a further 32,000 in districts supplied in bulk.

No person is supplied by means of stand-pipes.



## 2.—General Sanitary Defects.

The following table shows the work carried out under the public health and housing acts in relation to dwellinghouses during 1955 :—

<b>Table 40.</b> <b>Sanitary Improvements effected under the Public Health and Housing Acts.</b>							
No. of premises dealt with	...	...	...	...	...	...	1,954
Chimneys repaired or renewed	...	...	...	...	...	...	54
Closet conversions (Section 47 Public Health Act)	...	...	...	...	...	...	8
Dampness Remedied	...	...	...	...	...	...	299
Downspouts repaired or renewed	...	...	...	...	...	...	102
Drains or sewers cleansed	...	...	...	...	...	...	327
Draines or sewers tested	...	...	...	...	...	...	181
Drains or sewers repaired or renewed	...	...	...	...	...	...	338
Dust bins provided	...	...	...	...	...	...	63
Fireplaces repaired or renewed	...	...	...	...	...	...	40
Floors repaired or renewed	...	...	...	...	...	...	89
Food storage provided or repaired	...	...	...	...	...	...	6
Gutters repaired or renewed	...	...	...	...	...	...	154
Lighting and ventilation improved	...	...	...	...	...	...	13
Nuisances abated (general)	...	...	...	...	...	...	170
Passages or yard surfaces flagged, etc.	...	...	...	...	...	...	28
Plasterwork repaired or renewed	...	...	...	...	...	...	368
Premises disinfested or cleansed	...	...	...	...	...	...	46
Premises treated for rats or mice or rendered rodent proof	...	...	...	...	...	...	55
Roofs repaired or renewed	...	...	...	...	...	...	251
Sinks repaired or renewed	...	...	...	...	...	...	44
Staircases repaired or renewed	...	...	...	...	...	...	20
Verminous persons cleansed	...	...	...	...	...	...	2
Walls repaired or renewed	...	...	...	...	...	...	123
Water service pipes repaired or renewed	...	...	...	...	...	...	57
W.C. accommodation provided, improved, repaired or renewed	...	...	...	...	...	...	399
Windows repaired or renewed...	...	...	...	...	...	...	318
Woodwork (general) repaired or renewed	...	...	...	...	...	...	145
Other work done	...	...	...	...	...	...	171

A total of 619 informal notices and 241 statutory notices were served under the Public Health Act during the year. The latter are itemised in Table 41.

Eight waste-water closets were converted during the year and assistance given to seven owners who took advantage of Section 47 of the Public Health Act.

In two instances it was necessary to obtain a nuisance order and in two instances proceedings were successfully instituted against owners who had failed to comply with sanitary notices.

In one other instance a summons was taken out, but the work was done before the hearing, the case being withdrawn on payment of costs.



**Table 41.**  
**Summary of Statutory Notices served under Public Health Act, 1936.**

<i>Section</i>									<i>Number served</i>
24	Repairs to public sewers	...	...	...	...	...	...	...	7
39	Drainage	...	...	...	...	...	...	...	37
44 and 45	Closet accommodation	...	...	...	...	...	...	...	47
56	Yard paving	...	...	...	...	...	...	...	4
58	Dangerous buildings and structures	...	...	...	...	...	...	...	6
75	Dust bins	...	...	...	...	...	...	...	28
92/3	Abatement notices (statutory nuisances)	...	...	...	...	...	...	...	110
103	Smoke emissions	...	...	...	...	...	...	...	2
									241

### 3.—Tents, Vans and Sheds.

Three sites are occupied by accredited members of the Showmen's Guild as winter quarters.

One renewal of application to station a van on private land in the borough was granted.

### 4.—Common Lodging Houses.

There are now three common lodging houses in the borough and 120 visits to them were carried out by the sanitary inspectors.

One lodging house was sold early in the year and ceased to be used as such.

### 5.—Places of Public Entertainment.

There are 16 cinemas in the area plus one theatre which holds a cinematograph licence, and in 1955 a full certificate was issued to 12. A provisional certificate was issued to five where consequent on the fitting of a new screen, certain seats did not comply with viewing requirements.

There are two theatres, three billiard halls and 26 dance halls in the borough. Three of the cinemas hold licences for stage plays and seven other premises are similarly licensed. 120 visits were made to these places of public entertainment.

One cinema closed down during the year and one theatre which also held a cinematograph licence ceased to be used as a place of public entertainment.

### 6.—Drainage Work.

Drain defects, renewals and alterations have occasioned 2,428 visits by the sanitary staff.

Section 83 of the Preston Corporation Act, 1947, is used in cases of emergency in dealing with blockages. Notices were served under this Section in two instances.

### 7.—Offensive Trades.

There are 17 premises established as offensive trades in the borough. The trades include fat and tallow melters, tripe boilers, fell-monger, gut scraper, tanner and leather dressers, soap boilers, and rag and bone dealers. Of these premises the majority have been established for a considerable number of years, six only being required to make application for periodic renewal of their licence to carry on an offensive trade. Applications in respect of these six have been renewed for a period of 12 months, one firm transferring their business from one premises in the borough to another.

Two applications to establish an offensive trade in the borough were refused

### 8.—Disinfection and Disinfestation.

Disinfection as a terminal process following infectious disease is now a negligible part of the work of the staff responsible, but a considerable amount of disinfection by steam and otherwise and much disinfestation by H.C.N.gas are regularly carried out. 138 removals from old property to new corporation houses were effected during the year and 186 rooms were treated with insecticide to combat various infestations.

The service is maintained by a staff of three, and together with the necessary motor transport these men run a general transport pool for all sections of the Health Department.

### 9.—Factories.

There were 448 visits made by the Sanitary Inspectors to factories during the year. The following tables show a summary of visits and work done, etc., under the Factories Act :—

<b>Table 42.</b> <b>Inspections.</b>				
Premises	No. on the Register	No. of Inspections	No. of written notices	No. of Prosecutions
Non-mechanical factories in which Sections 1, 2, 3, 4 and 6 are enforced by Local Authority... ..	95	55	—	—
Mechanical factories in which Section 7 is enforced by the Local Authority	745	382	6	—
Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)...	25	11	—	—
Totals ... ..	865	448	6	—

**Table 43.**  
**Defects.**

Particulars and Section	No. of Defects found	No. of Defects remedied	No. referred		No. of Prosecutions
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1) ...	3	1	—	3	—
Overcrowding (S.2) ...	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4) ...	—	—	—	—	—
Ineffective drainage of floors (S.6)... ..	—	—	—	—	—
Sanitary conveniences (S.7)—					
(a) insufficient ...	3	2	—	1	—
(b) unsuitable or defective ...	9	5	—	5	—
(c) not separate for sexes ...	2	1	—	1	—
Other offences against the Act...	—	—	—	—	—
Total ...	17	9	—	10	—

## 10.—Outworkers.

Eighteen workers were notified under Section 110 of the Factories Act, 1937, which requires that the local authority be notified of any outworkers employed in their area.

## 11.—Rodent Control.

At the end of the year there were two rodent operators employed full-time on pest extermination under the general direction of the sanitary inspectors, one rodent operator having left during the year.

The Chief Sanitary Inspector attended No. 9 Workable Area Committee Meetings as representative of this Authority. These meetings, which are held quarterly, are organised by the Ministry of Agriculture, Fisheries and Food to promote co-operation on rodent control between adjacent authorities and the Ministry.

During the year one test baiting campaign was carried out in the town's sewers. The number of manholes test-baited was 328. Two poison treatments were made, a total of 1,488 manholes being poison baited in all. To facilitate this work men were loaned by the Borough Surveyor, supervision being carried out by the sanitary inspectors.

The work of the staff is summarised in the following table.



**Table 44.**  
**Prevention of Damage by Pests Act, 1949.**

	Type of Property				
	(1) Local Authority	(2) Dwelling houses	(3) All other (including Business and Industrial)	(4) Total of (1), (2) and (3)	(5) Agri- cultural
I. Number of properties in Local Authority's District	125	35,077	6,819	42,021	27
II. Number of properties in- spected by the Local Authority during 1955 as a result of :					
(a) Notification ...	28	302	100	430	—
(b) Survey under the Act. ...	2	77	12	91	—
(c) Otherwise ( <i>e.g.</i> , when visited primarily for some other purpose	2	6	12	20	2
III. Total inspections carried out ...	158	2,140	776	3,074	20
IV. Number of properties (un- der II) found to be in- fested by :—					
(a) Rats { Major ...	—	—	1	1	—
{ Minor ...	9	220	46	275	2
(b) Mice { Major ...	8	5	13	26	—
{ Minor ...	14	24	38	76	—
V. Number of infested prop- erties (in IV) treated by Local Authority ...	23	122	63	208	1
VI. Total treatments carried out ...	23	122	65	210	—
VII. No. of notices served under Section 4 of the Act :					
(a) Treatment ...	—	—	—	—	—
(b) Structural work ( <i>i.e.</i> , proofing) ...	—	1	—	1	—

**12.—Shops.**

This work is carried out in conjunction with other duties concerning shop property. During the year 20 visits were made specifically in connection with the welfare provisions of the Shops Act.

**13.—Atmospheric Pollution.**

Four applications for prior approval under Section 102 of the Preston Corporation Act, 1947, were received during the year. One of these was approved. In the case of the other three, agreement had not been reached about the proposals before the end of the year, but it was anticipated that subject to certain modifications approval would be granted.

The Council at their October meeting accepted a report with regard to the making of an Order under Section 29 of the Preston Corporation Act, 1952 (Smokeless Areas) and resolved that such an order be submitted to the Ministry of Housing and Local Government for confirmation. The order which was unopposed was confirmed with some technical modification on 15th December, 1955, to operate as from 1st July, 1956. A copy of the order is contained in an appendix to this report. The area to which the order applies is some 50.5 acres in extent and contains within it the following premises :—

Dwellings	...	...	...	...	...	77
Offices	...	...	...	...	...	142
Shops	...	...	...	...	...	287
Commercial premises			...	...	...	70
Industrial premises	...	...	...	...		33
Other premises, <i>e.g.</i> , cinemas, cafes, etc.	...					125
						<hr/> 734 <hr/>

Living accommodation secondary to the main business is provided also in 56 cases as follows—offices 6, shops 18, other premises 32.

The area is given over largely to commerce, trade and professional uses and much preliminary work has been put in to persuade occupiers voluntarily to adopt smokeless methods of meeting their requirements. The public affected have in general co-operated very well and actively, and since no technical problem exists the provisions ought to operate easily to the advantage of the town generally.

The inspectors have continued their efforts to persuade industry to run their plants efficiently and with a minimum of smoke production and their routine work is summarised statistically below.

<b>Table 45.</b> <b>Atmospheric Pollution.</b>					
	Steam Boilers	Metallurgical Furnaces	Brick Kilns	Others	Total
1. Observations taken or deposits collected ...	147	6	1	49	203
2. Inspections on com- plaints ...	27	8	—	52	87
3. Nuisance source—					
Smoke ...	4	1	—	12	17
Grit ...	—	3	—	1	4
Noise ...	—	—	—	2	2

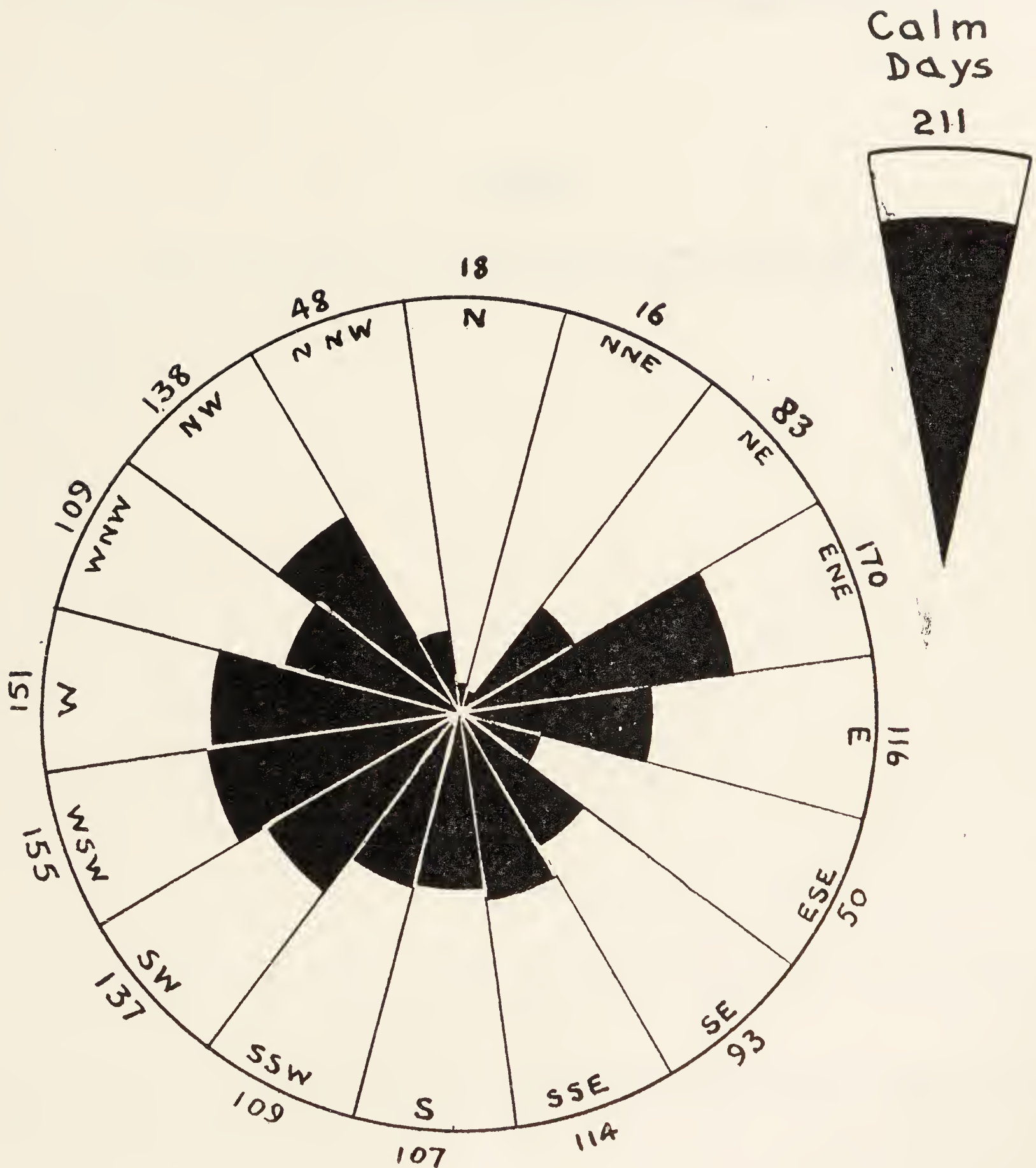
Forty-one notices were served under Section 102 of the Public Health Act, 1936, and 75 repairs, alterations or improvements were effected.

### **Atmospheric Pollution and its measurement.**

The following diagram shows the frequency of wind direction during the five years 1951-1955 as recorded daily at the Moor Park observatory.



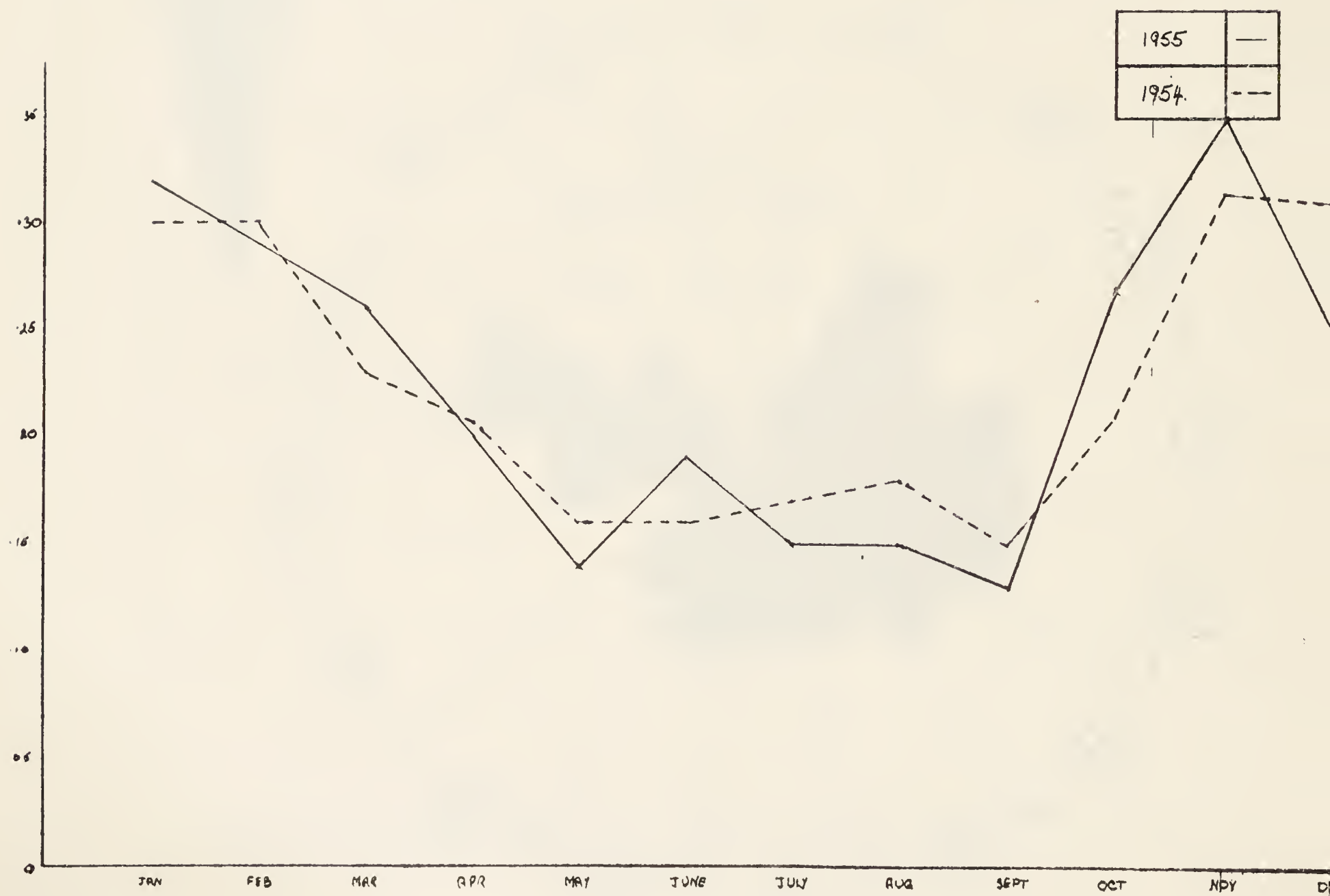
## WIND DIRECTIONS, 1951—1955.



Graph I shows for two years the average daily concentration of smoke in milligrams per cubic metre as measured by the smoke filter apparatus.

**Graph I.**

CONCENTRATION SMOKE IN MG PER M<sup>3</sup> 1955



Graph II shows for the same period the average daily concentration of sulphur dioxide in parts per million as measured by the volumetric apparatus.

Graph II.

CONCENTRATION SO<sub>2</sub> IN PARTS PER MILLION 1955





Graph III records atmospheric sulphur dioxide in milligrams of sulphur trioxide per day per sq. cms. of lead peroxide and brings out the point that sulphur dioxide pollution is persistently greater at the Royal Infirmary site than at the other two which differ little from each other.

**Graph III.**

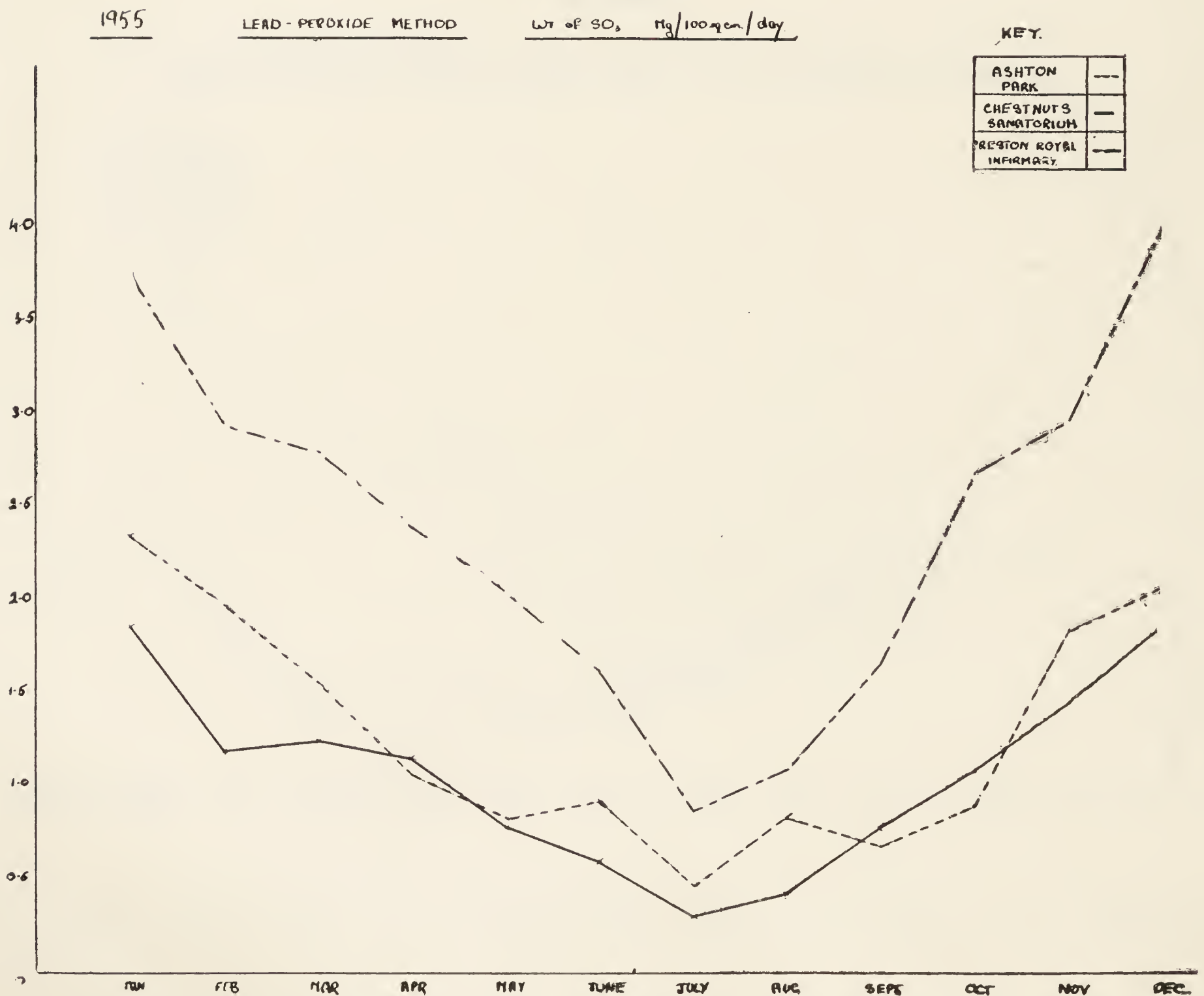


Table 46 gives the average deposit each month of solids in tons per square mile at each of the three stations.

**Table 46.**  
**Measurement of Deposited Matter by Deposit Gauge.**

	Average figures per month		
	Ashton Park	Chestnuts Sanatorium	P.R.I.
Rain in inches      ...      ...      ...      ...      ...	2.17	2.25	2.19
Total dissolved matter in tons per square mile ...	4.56	4.55	7.39
Total insoluble matter in tons per square mile ...	6.03	3.81	13.81
Soluble matter in CS <sub>2</sub> in tons per square mile ...	0.08	0.07	0.23
Other combustibles in tons per square mile      ...	1.95	0.96	4.74
Total solids in tons per square mile      ...      ...	10.60	8.18	21.20

#### 14.—Public Conveniences.

During the year the men's urinal situated in the rockery adjoining the Lancashire and Yorkshire Railway Bridge on Miller Park was demolished as it was considered that the expenditure necessary to bring this fitting into working order was not justified, and alternative accommodation was available within reasonable distance.

The Grange Park combined public convenience/sports pavilion was commenced, but at the end of the year had not been completed.

Work was commenced on the new convenience for men and women at the junction of Victoria Street and Fylde Road.

Policy, as determined by the Health Committee, is now being developed and taking practical shape. Four conveniences in Church Street, Earl Street and Birley Street are now served each by an attendant and are fitted with basins provided with hot and cold water. Paper towels are provided without charge and the use of linen towels can be had at a charge of twopence. Almost 30,000 linen towels were used during the year mainly by men, and it would appear that great use is being made of this public service by shoppers visiting the town, by transport crews passing through and by crowds attending sporting events.

Weighing machines have been fitted in each of these four conveniences and have proved popular with the public and profitable to the Corporation.

Replacement or modernisation of other conveniences situated throughout the rest of the town is continuing apace. In the new conveniences wash hand basins with hot and cold water and hot air hand driers are being provided. It is a matter of regret that much senseless and malicious damage is regularly done by some of the very people for whom the provision is being made. There would seem to be no limit to the stupidity of some adolescents.

**15.—Pharmacy and Poisons Act.**

In connection with the Pharmacy and Poisons Act, Part 2, registrations, 40 visits were paid to premises, mainly small mixed business shops seeking registration under the Act.

**16. Hairdressing Establishments.**

Two additional registrations and four changes of registration under Section 108, Preston Corporation Act, 1947, were approved during the year.

In all, 102 visits were made in connection with the supervision of hygienic conditions in these establishments.

**17.—Fertilisers and Feedingstuffs Act, 1926.**

Six samples of fertiliser and two samples of feedingstuffs were taken during the year. One sample of fertiliser was not in accordance with the statutory statement.

There were no requests from purchasers to have articles sampled and analysed in accordance with Section 3 of the Fertilisers and Feedingstuffs Act, 1926.

**18.—Rag Flock.**

At the end of the year there were six premises registered in accordance with Section 2 of the Rag Flock and Other Filling Materials Act, 1951.

Twelves samples of filling materials were taken during the year and the results are itemised in the following table :—

Table 47.								
Class of Sample					Number of Samples taken	Satisfactory	Unsatisfactory	
Coir Fibre	...	...	...	...	3	3	—	
Cotton Felt	...	...	...	...	3	3	—	
Kapok	...	...	...	...	1	1	—	
Rag Flock	...	...	...	...	3	3	—	
Rag Flock/Wool Flock			...	...	1	1	—	
Wool Flock	...	...	...	...	1	1	—	



## Housing

### **Clearance of Unfit Houses.**

Inspection to assess the standard of housing generally in the town and to determine the fitness of houses for human habitation was continued on an extensive scale during 1955. In July a report, reproduced as an appendix to this volume, was submitted to the Health Committee and this report formed the basis of the Council's proposals as required by Section 1 of the Housing Repairs and Rents Act, 1954, for dealing with houses appearing to the authority to be unfit for human habitation.

### **Clearance Areas.**

The Council's second post-war clearance scheme, that is, Brunswick Street, Pleasant Street, etc., was confirmed early in 1955 and rehousing of the tenants from the 169 unfit houses involved commenced in the autumn. By the end of the year 47 families comprising 161 persons had been rehoused by the Corporation.

Formal representation of 268 houses representing pockets of old insanitary dwellings mainly in the innermost zone of the town was made in June. The Council's proposals subsequently involved the submission to the Minister of Housing and Local Government of eight compulsory purchase orders, details of which follow.

The total areas comprised 4,450 acres and gave a density of 65.8 houses to the acre. A total of 730 persons equivalent to 2.72 per house were affected.

#### **1. Preston (Butlers Court) Compulsory Purchase Order, 1955.**

Location : A cul-de-sac on the south side of Fishergate approached by a passage 10 feet wide between Barclays and the District Banks in Fishergate.

Area of site : 0.144 acre or 744 sq. yards.

House density per acre : 70.

#### **2. Preston (Heatley Street, etc.) Compulsory Purchase Order, 1955.**

Location : An irregularly shaped area lying between Friargate on the east, Corporation Street on the west, and bounded at the northern extremity by Simpson Street, and to the south by Hill Street.

Area of site : 0.805 acre or 3,896 sq. yards.

House density per acre : 71.33.

### **3. Preston (Ladywell Street, etc.) Compulsory Purchase Order, 1955.**

Location : These houses are grouped on two sides of a square from which other residential property has been cleared. The remainder of the site is now almost entirely occupied by industrial or commercial undertakings.

Area of site : 0.462 acre or 2,236 sq. yards.

House density per acre : 54.

### **4. Preston (Lodge Street, etc.) Compulsory Purchase Order, 1955.**

Location : On the northern side of Marsh Lane immediately to the west of the railway viaduct.

Area of site : 0.438 acre or 2,120 sq. yards.

House density per acre : 66.

### **5. Preston (Park Place, etc.) Compulsory Purchase Order, 1955.**

Location : Two old rows of houses remaining in the midst of commercial property behind Fishergate.

Area of site : 0.187 acre or 907 sq. yards.

House density per acre : 85.3.

### **6. Preston (Patten Street, etc.) Compulsory Purchase Order, 1955.**

Location : The houses included in this order as unfit are arranged in nine groups and they are intermingled with commercial and other property lying in a triangle of land formed by Walker Street, Lawson Street and Market Street.

Area of site : 1.332 acre or 6,454 sq. yards.

House density per acre : 47.25.

### **7. Preston (Pitt Street, etc.) Compulsory Purchase Order, 1955.**

Location : Two groups of houses immediately to the west of the Railway Viaduct where it crosses Marsh Lane, with Marsh Lane as the northern and Ribble Street the southern boundaries.

Area of site : 0.819 acre or 4,297 sq. yards.

House density per acre : 60.5.







No. 1.— BRUNSWICK STREET. A typical view of the fronts of old property being dealt with at present.

No. 2.— BRUNSWICK STREET. View of the backs of property showing general deterioration and restricted yard space.







No. 3.—BRUNSWICK STREET. View of the backs of property showing general deterioration and restricted yard space.

No. 4.—RUSSELL STREET AND THE BACK OF PLEASANT STREET. Unfit property abutting on a pre-war cleared site.









### 8. Preston (Union Street, etc.) Compulsory Purchase Order, 1955.

Location : Three groups of property lying between Friargate and Market Street and extending from Starchhouse Square to opposite Trinity Square.

Area of site : 0.263 acre or 1,275 sq. yards.

House density per acre : 72.

The Butlers Court Compulsory Purchase Order was subsequently replaced by a clearance order.

**Table 48.**  
**No. of houses and persons involved in clearance areas.**

Clearance Area					Adults		Children under 10 yrs.		No. of houses
					M.	F.	M.	F.	
Butlers Court	...	...	...	...	6	10	1	1	11
Heatley Street	...	...	...	...	57	52	16	4	47
Ladywell Street	...	...	...	...	24	26	7	4	25
Lodge Street	...	...	...	...	41	39	8	15	29
Park Place ]...	...	...	...	...	19	20	2	—	16
Patten Street	...	...	...	...	65	80	14	23	63
Pitt Street ...	...	...	...	...	62	68	12	18	58
Union Street	...	...	...	...	16	20	—	—	19
Total ... ..					290	315	60	65	268

### Individual Unfit Houses.

Formal representation was made in respect of 23 individual houses considered unfit under Section 11 of the 1936 Act. During the year the Council made 17 demolition orders and 5 closing orders under the Housing Act 1936 and the Local Government (Miscellaneous Provisions) Act 1953 respectively relating to these and other representations overlapping from the previous year. 6 houses were demolished as a consequence of orders made. 8 families found their own accommodation from houses the subject of demolition orders under Section 11 of the 1936 Act, all consequent on eviction by possession warrants granted to the local authority.

### Repair of unfit houses.

Representation and the subsequent service of notice under the Housing Act for the carrying out of work to make a house fit were undertaken in ten instances during the year. 30 houses were rendered fit after informal or formal action.

General repair of houses under public health act procedure was also carried out and is referred to in the preceding chapter of the report.

Table 49 records statistically the work carried out under the housing acts during 1955.

**Table 49.**  
**Housing Acts, 1936—1952. Local Government (Miscellaneous Provisions)**  
**Act, 1953.**  
**Action taken in respect of unfit houses under the above Acts.**

Number of Inspections	...	...	...	...	...	...	...	...	1,835
Number of houses which on inspection were considered to be unfit for human habitation	...	...	...	...	...	...	...	...	258
Number of Representations made to the Council—									
(a) with a view to service of Notice requiring execution of works								...	10
(b) with a view to making of Demolition or Closing Orders								...	23
Number of notices served requiring execution of works—									
(a) informal	...	...	...	...	...	...	...	...	32
(b) formal	...	...	...	...	...	...	...	...	10
Number of houses rendered fit after service of—									
(a) informal notice	...	...	...	...	...	...	...	...	26
(b) formal notice	...	...	...	...	...	...	...	...	4
Number of Demolition Orders made under Section 11 of Housing Act, 1936									17
Number of Closing Orders made under the Local Government (Miscellaneous Provisions) Act, 1953	...	...	...	...	...	...	...	...	5
Number of Undertakings accepted by the Council	...	...	...	...	...	...	...	...	—
Number of houses demolished as a result of Orders made	...	...	...	...	...	...	...	...	6

**Overcrowding.**

Though no complete survey has been carried out it is clear from a number of sources of information that overcrowding has markedly decreased in extent and, so far as individual families are concerned, in severity. The housing survey of unfit property has not revealed any material overcrowding whilst the number of complaints from residents on this score has dropped to less than half that of the previous year and one quarter that of 1951. Furthermore the severity of overcrowding exposed as a consequence of investigation is usually of the nature of one half or one person more than the permitted number.

Generally speaking serious overcrowding does not now seem to be a material problem in the town. It is still met with in some families where parental responsibility is deficient, where a family has grown up but prefers to remain in familiar surroundings at the expense of crowded living space and where deliberate overcrowding is achieved in the hope of jumping the housing queue. The first group constitutes a social problem of which effective housing is only a part, the second group usually consist of quite reasonable people who look on their overcrowding as a temporary measure to be alleviated by marriage of the older children and by the two-year military service of the sons whilst the third group has greatly lessened in number as the manoeuvre has been seen to yield such poor results.

Table 50 summarises the position for 1955.



**Table 50.**  
**Overcrowding, 1955.**

Number of complaints received	...	...	...	...	...	...	...	41
Number of complaints confirmed and referred to Borough Surveyor	...	...	...	...	...	...	...	9
Number of complaints not confirmed	...	...	...	...	...	...	...	13
Number of complaints confirmed but no action taken	...	...	...	...	...	...	...	17
Number rehoused while complaint was being investigated	...	...	...	...	...	...	...	2
Number rehoused by Local Authority	...	...	...	...	...	...	...	16

**Certificates of Disrepair.**

Inspections in relation to certificates of disrepair under the Housing Repairs and Rents Act, 1954, were carried out during the year and the position is summarised in Table 51 below.

**Table 51.**  
**Housing Repairs and Rents Act, 1954.**  
**Certificates of Disrepair.**

Number of certificates applied for	...	...	...	...	...	...	...	36
Number of certificates granted	...	...	...	...	...	...	...	38
Number of certificates refused	...	...	...	...	...	...	...	1
Number of applications for revocation	...	...	...	...	...	...	...	25
Number of certificates revoked	...	...	...	...	...	...	...	23
Number of revocation certificates refused	...	...	...	...	...	...	...	2

## Food Hygiene.

Another course of lectures was run in conjunction with St. John Ambulance Brigade and some sixty-odd food handling organisations were invited to send members of their staffs. A class of 36 was formed of whom 12 entered for the examination.

Premises	Number of visits
Premises registered under Section 14 Food and Drugs Act, 1938 ...	266
Cafes, restaurants and snack bars ... ..	263
Bakehouses ... ..	267
Food hawkers and Storage accommodation ... ..	27
Food Shops ... ..	505
Food Markets ... ..	971
Food preparing premises ... ..	239
Licensed premises ... ..	33
Registered Dairies and Bottled Milk Distributors ... ..	601
Premises re the inspection of food ... ..	675
	<b>3,847</b>

Premises	Number of visits
Premises registered under Section 14 Food and Drugs Act, 1938 ...	266
Cafes, restaurants and snack bars ... ..	263
Bakehouses ... ..	267
Food hawkers and Storage accommodation ... ..	27
Food Shops ... ..	505
Food Markets ... ..	971
Food preparing premises ... ..	239
Licensed premises ... ..	33
Registered Dairies and Bottled Milk Distributors ... ..	601
Premises re the inspection of food ... ..	675
	<b>3,847</b>



**Table 53.**  
**Repairs and improvements effected in food preparing premises.**

Repair or Improvement	Number
Chimneys repaired or renewed ... ..	1
Dampness remedied ... ..	3
Downspouts repaired or renewed ... ..	1
Drains or sewers cleansed ... ..	1
Drains or sewers tested ... ..	1
Drains or sewers repaired or renewed ... ..	1
Dust bins provided ... ..	8
Fireplaces repaired or renewed ... ..	1
Floors repaired or renewed ... ..	36
Food preparing premises cleansed ... ..	24
Food storage provided or repaired ... ..	8
Gutters repaired or renewed ... ..	2
Hand washing facilities in food premises provided ... ..	6
Lighting and ventilation improved ... ..	19
Passages or yard surfaces flagged, etc. ... ..	1
Plasterwork repaired or renewed ... ..	33
Premises disinfested or cleansed ... ..	4
Premises treated for rats or mice or rendered rodent proof ... ..	1
Roofs repaired or renewed ... ..	2
Sinks repaired or renewed ... ..	13
Walls repaired or renewed ... ..	29
Water service pipes repaired or renewed ... ..	3
W.C. accommodation provided, improved, repaired or renewed ... ..	7
Windows repaired or renewed ... ..	15
Woodwork (general) repaired or renewed ... ..	15
Other work done ... ..	16

**MILK.**  
**Milk and Milk Sampling.**

One hundred and twenty-five samples of milk were taken from supplies coming into the borough to determine the presence of tubercle bacilli. Table 54 shows that five of the samples gave positive findings. Consequent on report of these findings and of the subsequent inspection of cattle by veterinary officers of the Ministry of Agriculture and Fisheries three cows were slaughtered.

**Table 54.**  
**Milk samples taken for biological examination.**

Class of milk sample	No. of samples taken	Tubercle Bacilli	
		Absent	Present
Ungraded ... ..	68	63	5
Tuberculin Tested ... ..	32	32	—
T.T. farm bottled ... ..	25	25	—
Totals ... ..	125	120	5

Table 55 shows the number of samples of milk taken for bacteriological examination. In the case of unsatisfactory samples of known farm supplies, or producer/retailers, the information is passed to the Area Chief Milk Production Officer, Ministry of Agriculture, for his investigation.

Table 55. Milk samples for bacteriological examination.					
Class of milk sample	No. of samples taken	Coliform Bacilli in 0.01 Millilitre		Methylene Blue Test	
		Absent	Present	Passed	Failed
Ungraded ... ..	68	54	14	46	22
Tuberculin Tested ... ..	32	29	3	31	1
T.T. farm bottled ... ..	25	22	3	23	2
T.T. Pasteurised ... ..	2	2	—	9	—
Pasteurised ... ..	11	11	—	4	—
Totals ... ..	138	118	20	113	25

A total of three-hundred and ninety-one samples of milk were submitted to the Public Analyst for chemical analysis. These are summarised in Table 56. Eleven samples of milk from schools and schools kitchens were all found to be satisfactory.

Table 56. Milk samples taken for chemical analysis.					
Class of milk sample	No. of Samples taken	Informal		Formal	
		Satis- factory	Unsatis- factory	Satis- factory	Unsatis- factory
Ungraded ... ..	142	114	10	10	8
Tuberculin Tested ... ..	74	47	3	17	7
T.T. Pasteurised ... ..	74	67	1	5	1
T.T. (Channel Islands) ... ..	7	7	—	—	—
Pasteurised ... ..	84	65	—	19	—
Sterilised... ..	10	10	—	—	—
Totals ... ..	391	310	14	51	16

Eight of the unsatisfactory samples showed small fat deficiencies, twenty-one contained extraneous water and one contained an excessive amount of extraneous dirt.

Warning letters were sent to thirteen producers, and one dairyman, whilst two farmers and one dairyman were interviewed regarding deficiencies. In all instances follow-up samples were satisfactory.

One producer was prosecuted and fined £10 for the presence of extraneous water in three of the formal samples.



**Table 57.**  
**Milk samples taken for Phosphatase, Methylene Blue and Turbidity Tests.**

Class of milk sample	No. of samples taken	Phosphatase		Meth. Blue		Turbidity	
		Passed	Failed	Passed	Failed	Passed	Failed
Pasteurised ... ..	81	80	1	69	—	—	—
T.T. Pasteurised ... ..	71	69	2	67	2	—	—
Sterilised ... ..	10	—	—	—	—	10	—
Totals ... ..	162	149	3	136	2	10	—

One sample of pasteurised milk which failed the phosphatase test was from a plant outside the borough and the authority concerned was notified. The two tuberculin tested pasteurised samples which failed the phosphatase test were from a plant in the borough.

In one instance a faulty flow diversion valve on the High Temperature Short Time Pasteuriser was the cause of the failure. In all cases follow-up samples were satisfactory.

In the two instances where T.T. pasteurised milks failed the Methylene Blue test, the Tests were declared void in accordance with Part III of the Milk Special Designation (Pasteurised and Sterilised Milk) Regulations, 1949 as the atmospheric shade temperature exceeded 65 F. after sampling, but before testing.

### **Dairies and Milk Distributors.**

At the end of the year there were twenty-six premises registered as dairies. The owners of two of these dairies hold licences to pasteurise milk under the Milk (Special Designation) Regulations, 1949. Two hundred and twenty-four distributors are registered for the sale of bottled milk at shops. There are also on the register twenty-one distributors operating from registered premises outside the borough and approximately twenty dairy farmers are known to be retailing milk within the borough.

The number of registered dairy premises has continued to fall slowly. In the last three years, thirteen premises have been removed from the register. In 1955 there was a reduction of two.

Where small dairies selling milk are operated in conjunction with a retail shop, the proprietors are being persuaded to deal only in ready bottled designated milks, and discontinue the use of the dairies. Others have been taken over and closed down by a larger dairy firm which has then operated from its own registered premises.

The structural standard and cleanliness of registered dairies remains good. Most milk bottling in the borough is carried out in the larger dairies where it is possible to apply a greater measure of control which together with the gradual reduction in the number of small dairies, accounts for the number of satisfactory milk bottle rinse samples shown in Table 58.

The two pasteurising plants in the area are of the "High Temperature Short Time" type.

Miscellaneous Foods, etc.

Three hundred and eight samples were submitted for bacteriological examination and one hundred and seventy-five samples for chemical analysis. These are summarised in the three subsequent tables.

In the table showing samples taken for bacteriological examination the figure of 146 relating to food poisoning outbreaks were mostly connected with one case which is referred to in the section of the report on Food Poisoning.

The samples consisted of various foods, swabs of working surfaces, equipment and utensils, taken at two bakeries belonging to the firm and from a butcher's shop supplying the bakery with meat.

Table 58.							
Miscellaneous samples taken for bacteriological examination.							
Class of sample				No. of Samples	Satisfactory	Unsatisfactory	
Milk bottle rinses	...	...	...	57	57	—	
Water	...	...	...	13	13	—	
Well water	...	...	...	2	2	—	
Swimming bath water	...	...	...	8	8	—	
Cockles	...	...	...	2	2	—	
Condensed milk	...	...	...	2	2	—	
Dried milk	...	...	...	1	1	—	
Tinned tomatoes	...	...	...	1	1	—	
Luncheon meat	...	...	...	1	1	—	
Samples in connection with Food Poisoning outbreaks				146	135	11	
Totals				233	222	11	

Ice Cream.

The cleanliness and structural conditions of premises where ice cream is manufactured and sold were satisfactory during the year.

Eighty-nine per cent of the bacteriological samples taken during the year fell into Grade 1 and 2 of the Methylene Blue test and also passed the B. Coli tests.

One sample taken for chemical analysis was slightly deficient in fat. A warning letter was sent to the producer and a follow-up sample was found to be satisfactory.

Table 59.				
Ice-cream samples taken for bacteriological examination.				
Number	Satisfactory		Unsatisfactory	
	Methylene Blue	B. Coli	Methylene Blue	B. Coli
75	67	66	8	9



In the ice cream trade the decline of recent years continued in the number of active manufacturers.

At the end of 1954 there were 20 registered manufacturers of ice cream in the borough. At the end of 1955 there were 15, two of whom did not manufacture any ice cream during the year.

**Table 60.**  
**Miscellaneous samples taken for chemical analysis.**

Class of sample	No. of samples taken	Informal		Formal	
		Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory
Miscellaneous Foodstuffs ...	50	46	4	—	—
Ice-cream ...	4	2	—	1	1
Seasonings, Sauces ...	11	11	—	—	—
Fish Paste ...	3	3	—	—	—
Preserves ...	14	14	—	—	—
Wines and Spirits ...	3	3	—	—	—
Fats ...	13	12	1	—	—
Tinned Milk ...	5	5	—	—	—
Sausages ...	11	9	2	—	—
Tea ...	1	1	—	—	—
Cream ...	4	4	—	—	—
Sweets, etc. ...	15	14	—	—	1
Potted shrimps ...	1	1	—	—	—
Town's water ...	2	2	—	—	—
Tinned Fruit ...	4	4	—	—	—
Tinned Fish ...	6	6	—	—	—
Sugar ...	1	1	—	—	—
Soft drinks ...	5	5	—	—	—
Medicines ...	9	7	2	—	—
Salts ...	2	1	1	—	—
Dried milk ...	1	—	1	—	—
Brown Bread ...	1	1	—	—	—
Tinned tomatoes ...	1	1	—	—	—
Fruit juices ...	1	1	—	—	—
Luncheon meat ...	3	3	—	—	—
Drinking water ...	2	1	1	—	—
MISCELLANEOUS SAMPLE — Effluent ...	1	—	—	—	—
Totals ...	174	158	12	1	2

Four of the unsatisfactory samples were contraventions of the Labelling of Food Order and in each case packers were approached.

**Wholesale Fish Market.**

During the year 4 tons 10 cwts. 3 qrs. of fish was surrendered as unfit for human consumption.

This market where fish is received by rail is antiquated and completely out of line with present ideas on the proper care and handling of fish. The surface area of the market is cobbled so that effective cleansing cannot be carried out. The buildings generally are of corrugated iron and wood and, though hosed daily, do not permit adequate cleansing.

No proper system of cleansing empty fish boxes operates nor are there facilities for such beyond a cold water stand pipe.

**Retail Markets.**

No material change has taken place in the arrangements which exist at the open markets where food is exposed for sale at open stalls.

**Condemnation of Food.**

No food was seized by formal procedure during the year, but the following foodstuffs were voluntarily surrendered because of unfitness for human consumption :—

Table 61.									
Unfit food surrendered.									
								lbs.	ozs.
Canned Goods	...	...	...	...	...	...	...	9,170	12
Bacon and Ham	...	...	...	...	...	...	...	386	—
Cooking fats	...	...	...	...	...	...	...	178	—
Dairy produce	...	...	...	...	...	...	...	225	10
Dried fruit	...	...	...	...	...	...	...	8,271	—
Fruit	...	...	...	...	...	...	...	300	—
Fowl	...	...	...	...	...	...	...	393	—
Frozen egg	...	...	...	...	...	...	...	1,599	—
Imported rabbit	...	...	...	...	...	...	...	60	—
Pickles and sauces	...	...	...	...	...	...	...	—	10
Prepared foods	...	...	...	...	...	...	...	101	—
Yeast	...	...	...	...	...	...	...	137	—
								20,822	—

In addition to the above, 173 tons 12 cwts. 9 lbs. of bananas, grape fruit and coconuts, and 36 lbs. “ Argentine ” corned beef were surrendered at the Port of Preston as unfit for human consumption.

**Agriculture Act, 1937 (Milk and Dairies Regulations, 1949).**

Visits are made by the Veterinary Officer to herds in the borough in his capacity as a veterinary officer of the Minister of Agriculture. Inspections of herds in the borough where milk is pasteurised before sale are still suspended and other clinical examinations of Attested Herds are made at the time of the official tuberculin test. As a result, no herds were clinically inspected by the Veterinary Officer during the year.



Of the eleven dairy herds in the borough six are either Attested or hold Tuberculin Tested licences. Of the other five, one farm premises is likely to be used for building purposes in the near future and it is hoped that the four left will shortly carry out tuberculin testing.

The Tuberculosis Area (Eradication) Order does not yet include Preston ; this would make testing of all cattle compulsory in the area concerned. As the progress of tuberculosis eradication in Lancashire is encouraging, this Order may be applied to Preston area within a reasonable time.

## MEAT.

The veterinary officer and meat inspectors made visits as under :—

Table 62.									
Visits made by veterinary officer and meat inspectors.									
							Veterinary Officer	Meat Inspectors	
Visits to public slaughterhouses	...	...	...	...	...	...	438	270	
Visits to butchers' shops	...	...	...	...	...	...	2	24	
Visits to cowsheds, dairies and milkshops	...	...	...	...	...	...	5	—	
Visits to shops, stores, etc., to inspect fresh meat brought into the borough	...	...	...	...	...	...	10	—	
Visits to food markets	...	...	...	...	...	...	1	2	

## Slaughter of Animals Acts, 1933-1954.

The total number of licensed slaughtermen on the register was 59, which is a considerable reduction from the figure of 95 of twelve months earlier. This reduction is almost entirely amongst men who took out licences on the off chance of being involved in an occasional killing. Of those remaining some are in full-time employment and some are only working part time slaughtering and the rest of the time are working in retail shops. No offence has been detected under the Act and no formal action has been necessary.

## Public Abattoir.

<b>Table 63.</b>				
<b>Number of animals killed and inspected.</b>				
Year	Cattle	Sheep	Pigs	Calves
1955 ... ..	7,764	33,652	7,422	432
1954 ... ..	7,735	40,418	12,352	351
1953 ... ..	8,048	32,422	7,825	249
1952 ... ..	8,288	30,583	5,331	296

**Table 64.**  
**Casualties (included in figures in Table 63).**

Year	Cattle	Sheep	Pigs	Calves
1955 ... ..	227	111	497	40
1954 ... ..	210	187	716	98
1953 ... ..	254	276	848	240
1952 ... ..	303	237	1,426	281

Apart from a decrease in the number of pigs killed the figures for total kill are very similar to the year before. No factor of outstanding importance occurred during the year, trade continuing on very similar lines to that prevailing during the period shortly after the removal of Ministry of Food control.

Generally speaking a slight decrease was recorded in the percentage of animals affected with disease.

Tuberculosis is slowly dying out as a result of the Attested Herds scheme, and as all affected cattle end up at either slaughterhouses or knacker yards the figures of percentage infection with tuberculosis as recorded at slaughterhouses bear no comparison with the general situation.

Parasitic infestation, mainly liver fluke, is the next heaviest cause of loss although in the large majority of cases only the offal is condemned.

### **Private Slaughterhouses.**

Only one private slaughterhouse is licensed by the Council. It has not been in use during this period.

### **Meat Marking.**

All cattle, sheep, pigs and calves, including casualty animals where appropriate are stamped after examination as fit for human consumption and any meat condemned is marked accordingly so as to avoid any chance of mistake. Meat deferred for further examination is detained by a notice attached to the carcase pending a decision.

### **Fresh Meat coming into the Borough from other areas.**

There is no doubt that a considerable amount of fresh meat comes into the borough from numerous places and it is not possible to inspect much of this meat. It is all believed to have been inspected at the place of origin and spot checks have confirmed this. No meat coming from outside the borough has been found unfit for consumption.



Table 65.

Carcases and Offal inspected and condemned in whole or in part.

	Total	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed ... ..	7,764	4,864*	2,900*	432	33,652	7,422	—
Number inspected ... ..	7,764	4,864*	2,900*	432	33,657	7,426	—
<b>ALL DISEASES EXCEPT TUBERCULOSIS AND CYSTICERCI</b>							
Whole carcases condemned ... ..	—	22	49	39	118	139	—
Carcases of which some part or organ was condemned ... ..	—	1,399	935	16	2,937	1,068	—
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci ... ..	—	26.9	34.9	12.7	9.1	16.3	—
<b>TUBERCULOSIS ONLY</b>							
Whole carcases condemned ... ..	—	21	43	1	—	26	—
Carcases of which some part or organ was condemned ... ..	—	586	751	4	—	234	—
Percentages of the number inspected affected with tuberculosis ... ..	—	12.5	28.1	1.0	—	3.40	—
<b>CYSTICERCOSIS</b>							
Carcases of which some part or organ was condemned ... ..	—	50	9	—	—	—	—
Carcases submitted to treatment by refrigera- tion ... ..	—	50	9	—	—	—	—
Generalised and totally condemned ... ..	—	—	—	—	—	—	—

\* Estimated figures.

**Public Health (Meat) Regulations.**

A slight improvement has occurred in the handling of meat, but there is a tendency to be too casual regarding the hygiene of meat handling. Constant watch is necessary to ensure that no carelessness occurs, and while the present situation is fair in standard the ideal of meat hygiene is still some distance away.

**Meat Inspected otherwise than at Abattoir.**

Visits are made to wholesalers and cold stores in the borough to keep watch as far as it is possible on meat coming into the borough. Very little complaint has been necessary as the meat has been inspected in the country of origin and less trouble seems to have occurred due to transit than was formerly the case.

The following table shows the amount of imported and fresh meat condemned during the year other than at the abattoir.

Table 66.							
Amount of condemned meat.							
Imported Beef ...	...	...	...	...	...	...	1,377 lbs.
Imported Mutton	...	...	...	...	...	...	12 lbs.
Imported Liver	...	...	...	...	...	...	94 lbs.
Home Killed Pork	...	...	...	...	...	...	54 lbs.
Home Killed Mutton	...	...	...	...	...	...	35½ lbs.
							1,572½ lbs.

**DISEASES OF ANIMALS ACTS AND ORDERS.**

**Anthrax Order, 1938.**

No confirmed case of anthrax occurred in the borough during the year. One suspected case reported was quickly proved to be negative. All suspected cases are examined by blood smears, but no other action has been necessary.

There was an increase in the number of outbreaks in the country during the year, but owing to the sporadic nature of the disease a considerable variation may occur in the number of outbreaks over a given period. Continued vigilance must be exercised to prevent this dangerous disease from spreading.

**Foot and Mouth Disease Order, 1938.**

No outbreak occurred in Preston or the vicinity during the year and no restrictions were applied locally to control this disease. Over the country as a whole the number of outbreaks was at a low level and comparatively little trouble was encountered in dealing with the disease.

**Atrophic Rhinitis Order, 1954.**

This disease in pigs first made its appearance in the country in 1954 when 4 outbreaks occurred. It was made notifiable in order to take stamping-out measures. Seven outbreaks occurred during 1955 none of which affected Preston.



### **Boiling of Animal Foodstuffs Order, 1947.**

This Order requires all waste food fed as swill to animals and poultry to be boiled before coming into contact with them, so as to destroy any particles of infection which may be contained in the food. Sporadic visits are paid to premises to ensure that there is no evasion of this regulation.

### **Sheep Scab Order, 1938.**

No sheep scab has occurred in the country since 1952 and the disease has been declared eradicated. Regulations regarding dipping of sheep, however, are still in force and were complied with in the borough, under supervision.

### **Swine Fever Order, 1938.**

This disease again occurred in the country with a similar incidence to that of the previous year. No outbreak or suspected case occurred in the borough, but pigs from contact premises and occasionally from infected premises were slaughtered at the Abattoir. Altogether 28 licences by Ministry Veterinary Inspectors were issued for the immediate slaughter at the abattoir of 122 pigs from infected or suspected premises.

### **Movement of Swine Order, 1950 and 1954.**

Store pig sales in Preston were cancelled from 10th May to 13th September, 1955, in order to prevent the spread of disease, and only sales of pigs for immediate slaughter allowed during this period. Three minor offences against this Order were dealt with by caution from the Chief Constable. During the year 3,233 licences were issued for the removal of pigs from the Market.

### **Warble Fly Order, 1948.**

This parasite seems to have caused less trouble during the year owing probably to the bad summer of 1954 having had a deleterious effect on the fly.

### **Tuberculosis Order, 1938.**

Ten cows were slaughtered at the Abattoir during the year .9 of these were totally condemned as unfit for food. Only one cow was removed from the Market under Article 8 of this Order. Two persons were fined £2 each for failure to notify this case.

The attested herds scheme continues to expand rapidly. Approximately 19,000 more herds were added to the register during the year.

### **Market Sales and Lairs Order, 1925.**

The market is required to be cleansed after each sale of animals and otherwise as required by the Local Authority. This latter special cleansing was carried out on several occasions.

**Transit of Animals Order, 1927-1947.**

Seven pigs, 2 cattle and 3 calves were detained under this Order as unfit to travel. No prosecutions were taken under this Order, but a few verbal cautions were issued.

Number of vehicles cleansed and disinfected	...	2,954
Number of vehicles inspected (without warning)...		133

**Transit of Horses Order, 1951.**

A prosecution was taken for an offence against this Order which occurred in 1954. Three people involved in this case were fined £25, £10 and £10 respectively, plus costs.

**Animals (Landing from Ireland, Channel Islands and Isle of Man) Order, 1938.**

309 licences were issued for the movement from the Market of 1,858 Irish cattle, and 9 licences in respect of 452 Irish sheep. In addition to this, 1,029 Irish cattle, 409 sheep and 23 fat pigs were moved to the abattoir under licence for immediate slaughter.

During the year the Port of Preston ceased to be an approved port for the landing of imported animals, due to disuse, and the accommodation being required for other cargo.

**Fowl Pest Orders, 1936-1954.**

This disease continued in the country during the year and temporary local orders were issued to control the movement. A standstill Order affecting Preston and district was issued in November and later extended to include all Lancashire. Only two poultry sales were held in the borough when the standstill order cancelled them. Since then licences of poultry for movement for immediate slaughter only have been permitted. Two confirmed outbreaks occurred in the borough and were dealt with by the Ministry Veterinary Officers. Several other premises were placed under restrictions as suspected or exposed to infection. At the end of the year the position appeared to be under control. One offence against these Orders is under consideration for prosecution.

**Poultry (Exposure for Sale) Order, 1937.**

No action has been necessary under the above Order. Only two poultry sales were held during the year owing to restrictions.

**Protection of Animals Acts, 1911-1912.**

Several cases of cruelty were detected in the borough during the year. One person was fined £10 for working a horse in an unfit state. Other cases were dealt with by written or verbal cautions. The R.S.P.C.A. Inspector has been very active in preventing and dealing with cases of cruelty.



**Table 67.**  
**Details of markets held.**

	Number of Sales	Number of Visits
Store Cattle and Sheep ... ..	48	48
Fatstock Sales ... ..	52	52
Pig Sales ... ..	36	36
Poultry Sales ... ..	2	2
Horse Sales ... ..	13	13
Attested Dairy Cattle ... ..	52	52
Non-Attested Dairy Cattle ... ..	52	52

**Number of Animals passing through the Market.**

The following table shows the number of animals passing through the market during the year, and figures for the previous years :—

**Table 68.**  
**Animals passing through market.**

	1955	1954	1953	1952
Attested Cattle ... ..	3,046	2,682	1,866	1,376
Dairy Cattle ... ..	3,154	4,947	7,251	9,417
Store Cattle ... ..	6,767	9,467	10,292	10,646
Calving Cows ... ..	979	1,536	2,543	2,744
Store Bulls ... ..	40	126	200	283
Fat Cattle ... ..	9,624	6,038	7,976	6,435
Fat Sheep ... ..	16,670	18,497	21,208	19,194
Store Sheep ... ..	822	912	1,167	342
Calves ... ..	10,721	13,266	14,468	15,664
Fat Pigs ... ..	29,100	29,444	24,052	25,505
Store Pigs ... ..	20,349	46,408	39,729	31,396
Horses ... ..	482	418	393	400
Poultry ... ..	835	13,157	31,900	19,447

## Port Health Administration.

### Port Health District.

The Port Health District of Preston extends from Formby Point on the south to a point about 2,350 yards south of the Victoria Pier, South Shore, Blackpool, on the north. The dock, which is 3,200 feet long by 600 feet wide, covers 40 acres and is approached by the entrance basin, 850 feet long by 300 feet wide, an area of  $4\frac{3}{4}$  acres.

The communicating locks are 550 long and 66 feet wide, with a depth of 29 feet 6 inches at high water ordinary spring tide. The dock is situated in the borough, and is about 16 miles up the River Ribble from deep water at the bar.

The quays are  $1\frac{1}{2}$  miles long. There are 170 acres of storage ground and 37,489 superficial yards of covered floor space.

The dock is equipped with hydraulic and steam cranes, and has ample railway facilities.

Much new road drainage and resurfacing has been carried out on the north side of the dock and new lighting standards installed. Two new public conveniences have been erected, one near the Pedders Lane entrance and the other adjacent to the West Indies fruit trade berthing shed and efforts to reduce atmospheric pollution from dock installations have been made by the installation of automatic stokers and the use of diesel fuel equipment.

Steps were taken during the year to have Preston confirmed as an 'Approved Port,' and on the 6th December, 1955, confirmation was received from the Ministry of Health that with effect from the 1st January, 1956, the Minister of Health approves and designates the port of Preston for the issue of Deratting and Deratting Exemption Certificates.

**Table 69.**

Name of Officer	Nature of Appointment	Date of Appointment	Qualifications	Any other appointment held
J. S. G. Burnett ...	Port Medical Officer	1.2.49	M.D., D.P.H.	Medical Officer of Health
F. S. Melville ...	Deputy Port Medical Officer	1.3.52	M.B., Ch.B., D.P.H.	Deputy Medical Officer of Health
L. J. Self ...	Port Sanitary Inspector	1.3.46	Cert. R.S.I.	District Sanitary Inspector
F. Yates ...	Deputy Port Sanitary Inspector	7.7.55	Cert. R.S.I.	District Sanitary Inspector



## ADDRESS OF MEDICAL OFFICER OF HEALTH:

Health Department, Municipal Building, Preston.

*Telephone No.:* Preston 4881.

## PRIVATE ADDRESS :

181 Liverpool Road, Penwortham, Preston.

*Telephone No.:* Preston Priory 83585.**(ii)—Amount of shipping entering the district during the year.**

During the year under review 2,365 ships of which 282 were foreign, entered the port. Details are shown on Table 70 below.

**Table 70**  
**Shipping Entering the district during the year.**

Ships from	Number	Tonnage	Number inspected		Number of ships reported as having, or having had during the voyage infectious disease on board
			By the Medical Officer of Health	By the Sanitary Inspector	
Foreign ports ...	282	239,128	39	282	nil
Coastwise	2,083	1,346,639	nil	424	nil
Total ...	2,365	1,585,767	39	706	nil

**(iii)—Character of Shipping and Trade during the year.**

The increased amount of passenger traffic referred to last year has been well maintained and the post war development of the vehicle and container service between Preston, Larne and Belfast has been continued by two firms.

Eight weekly ferry sailings in each direction are regularly maintained by one firm. Accommodation is provided for crews of vehicles being transhipped. Cabin accommodation is also available and in the summer months a certain amount of holiday traffic is carried.

A regular Preston-Larne container service by another firm has been maintained 5 to 6 times weekly, commencing with 3 Motor Vessels and later with 2 of an average 300 Reg. Tonnage. Containers are unloaded from ship direct to lorries for transport to inland towns.

No passengers embarked on these vessels.

The banana trade with the West Indies has now been firmly established. Three modern ships call at approximately ten day intervals.

Good cabin accommodation is provided on these ships and about 6-10 passengers are on board on each inward trip.

A total of 17 stowaways arrived during the year, all from the West Indies. Of these 15 were British and 2 were aliens.

A seasonal trade in fruit and vegetables with Spain and the Mediterranean ports has been developed and between May and July, 4,500 tons of potatoes and 3,700 tons of onions were landed.

The importation of cattle from Ireland has ceased and the lairage is being converted to other uses.

**Table 71**  
**Character of shipping and trade during the year.**

Passenger Traffic—				Alien	Other
Number of passengers inwards including stowaways				45	1,218*
Number of passengers outwards				...	1,318*
* Included in these figures are 1,089 inwards and 1,225 outwards, Larne-Preston Ferry Service.					
<b>Principal Importts—</b>					
Bananas, cement, coal, carbide, cork, china clay, coconuts, citrus fruits, esparto grass, grain, iron, motor spirit, onions, oil seeds, oyster shells, potatoes, potash, phosphates, pit props, steel, stone chippings, timber, shell grit, vehicles and containers (general cargoes), wood pulp.					
<b>Principal Exports—</b>					
Bitumen, bricks, coal, coke, machinery, oils, paper, petrol, pitch, tar, scrap, iron, vehicles.					
<b>Principal Ports from which ships arrive—</b>					
Arzew, Abo, Antwerp, Arendal, Amsterdam, Archangel, Barcelona, Baltimore U.S.A., Bayonne, Bordeaux, Brest, Bremen, Bergen, Cuxhaven, Copenhagen, Drammen, Friedrichstadt, Ferusund, Flushing, Fredrikshamn, Gothenburg, Galo, Gefle, Gdynia, Ghent, Halmsted, Hamburg, Helsingborg, Helsingfors, Hanswert, Jacobstadt, Kemi, Karlstad, Kotka, Karlsham, Kalmar, Kragero, Leningrad, La Palisse, Larvik, Littletown, Lulee, Lovisse, Marseilles, Marjoca, Montreal, Norrkoping, Namsos, Nantes, Naples, Oplo, Oran, Pugwash (Canada), Paris, Raumo, Rouen, Rostock, Rotterdam, St. Malo, Soderhamn, Stugsund, Sundsvall, Sfax, Skelleftes, Stockholm, Trondheim, Valencia, Valvick, Vestervik, Warnemunde, West Indies, Ports (St. Georges, Vieux Fort, Casties, Portsmouth, Roseau).					



**(iv)—Inland Barge Traffic.**

There is no inland barge traffic from the Port of Preston.

**(v)—Water Supply.**

(1) The district derives its water from the town supply which has an upland surface water of good quality, well suited for drinking and domestic purposes. Shipping is supplied from this source.

(2) Six water samples were taken. Two from the dock hydrants and one from a foreign vessel were satisfactory. Three samples from a coastal vessel were unsatisfactory due to defective condition of water tanks.

(3) Hydrants are situated at numerous points on the quay side. Stand pipes and hose pipes are stored in suitable accommodation to avoid contamination when they are not in use.

(4) Water boats are not used in the Port.

**vi)—Public Health (Ships) Regulations, 1952.****(1) LIST OF INFECTED AREAS.**

The list of infected areas is kept up to date and circulated regularly to pilots and customs officers serving the port.

**(2) RADIO MESSAGES.**

(a) The Port is not equipped for radio transmitting.

(b) The Port is not equipped for radio reception.

**(3) NOTIFICATIONS OTHERWISE THAN BY RADIO.**

The Corporation maintain a barge moored at Lytham which is in telephonic communication with the offices. Ships wishing to enter the Port signal this barge of their intentions and of any untoward circumstances on board. These messages are passed on to the Harbour Master who in turn communicates with the Port Medical Officer.

**(4) MOORING STATIONS.**

The mooring station for "infected" or "suspected" ships is one of the mooring buoys in the centre of the Albert Edward Dock. There is no provision made for mooring outside the dock.

**(5) ARRANGEMENTS FOR :****(a) Hospital Accommodation.**

All cases of infectious disease apart from smallpox are removed to the local Isolation Hospital, at Deepdale, Preston.

**(b) SURVEILLANCE.**

Surveillance is carried out as suggested in section 18(2) and section 37 of the Public Health (Ships) Regulations, 1952.

**(c) CLEANSING AND DISINFECTION.**

Quarters are disinfected by fumigation by HCN gas by arrangement with outside commercial firms if necessary. Local fumigation by sulphur dioxide and DDT in suitable cases is carried out by the Port Sanitary Inspector.

Infested and infected bedding and clothing are removed by van to the Corporation Disinfecting Station, Argyll Road, Preston.

Cleansing of persons is also carried out at the disinfecting station.

**(vii) Smallpox.**

(1) The reception of smallpox cases into hospital is in the hands of the Regional Hospital Board who advise as to which hospital is available for such purpose. Normally Ainsworth Hospital, Bury, is retained as the first regional hospital to admit cases of smallpox.

(2) Smallpox cases would be removed by an ambulance belonging to the Preston Corporation.

The vaccinal state of the crews of those ambulances is the responsibility of the Medical Officer of Health of the County Borough of Preston.

**(3) SMALLPOX CONSULTANTS :**

Dr. C. Metcalfe Brown, Town Hall, Manchester.

Central 3377 and Ringway 4273.

Dr. E. R. Peirce, Port Health Authority, Liverpool.

Central 0831/2 and 0723 and Garston 1236.

Prof. A. B. Semple, Belmont Grove, Liverpool.

Anfield 2271 and Gateacre 2081.

(4) Facilities for the laboratory diagnosis of smallpox are available at the Liverpool School of Tropical Medicine under the direction of Professor Downie.

**(viii) Venereal Disease.**

The Port Sanitary Inspector enquires of all ships as to the existence of venereal disease.

The clinics for this disease are at the Preston Royal Infirmary where treatment and advice are given and if necessary cases are admitted.

Posters are displayed prominently in the dockyard area and leaflets are distributed, printed in English, Norwegian and Swedish, giving directions for time and place of V.D. clinics.

23 alien and 2 British seamen in the port suffering from venereal diseases received treatment at the Preston Royal Infirmary Clinic during the year, the main incidence of these diseases being associated with the regular ship service between the West Indies and Preston.



<div>Table 72</div> <div>(ix) Cases of notifiable and other infectious diseases on ships.</div>				
Category	Disease	Number of cases during the year		Number of Ships concerned
		Passengers	Crew	
Cases landed from ships from foreign ports ... ..	Nil	Nil	Nil	Nil
Cases which have occurred on ships from foreign ports but have been disposed of before arrival ...	Nil	Nil	Nil	Nil
Cases landed from other ships ...	Nil	Nil	Nil	Nil

(x) Observations on the occurrence of malaria in ships.

No case of malaria has been reported.

(xi) Measures taken against ships infected with or suspected for plague.

No plague infected or suspected ship entered Preston during the year.

(xii) Measures against rodents in ships from foreign ports.

Steps were taken to have Preston established as a designated approved port and this was confirmed at the end of the year.

- (1) Enquiry is made of the captain of every ship from a foreign port as to undue mortality in rodents on board ship and each ship is examined by the Port Sanitary Inspector and a rodent operator for evidence of rodent infestation.
- (2) Bacteriological and pathological examination of rodents is carried out at the laboratory in the Preston Royal Infirmary. During the year no rat from foreign vessels was submitted for this examination.

(3) Ships are fumigated from time to time by the following commercial firms :—

London Fumigation Co., Ltd., Liverpool,  
Hivey Fumigation Co., Ltd., Liverpool,  
Deodor-x Hygiene Services Ltd., Birkenhead,  
and by informal arrangement with the Liverpool Port Health Authority deratting certificates issued.

No rat proofing has been done during the year.

(4) All ships from foreign ports are required to place efficient rat guards on all mooring ropes to prevent the passage of rats between ships and shore. In the event of vessels not having the required equipment on board rat guards are loaned at a charge of sixpence per guard daily and a charge of 14/- is made in the case of each loss.

Table 73								
Rodents destroyed during the year in ships from foreign ports.								
Category								Number
Black rats	...	...	...	...	...	...	...	14
Brown rats	...	...	...	...	...	...	...	2
Species not known	...	...	...	...	...	...	...	Nil
Sent for examination	...	...	...	...	...	...	...	Nil
Infected with plague	...	...	...	...	...	...	...	Nil

During 1955, Preston was not a designated approved port nor an approved port for the issue of deratting and exemption certificates and therefore Table 74 does not apply.

**Prevention of Damage by Pests Act, 1949.**  
**Prevention of Damage by Pests (Application to Shipping) Order, 1951.**

All classes of vessels as defined in section 2 of the Order were searched by the Port Sanitary Inspector and the rodent operator. 22 local deratting certificates were issued to masters of ships found to be free from rat infestation,



(xiii) Inspection of Ships for Nuisances.

Table 74					
Inspections and Notices.					
Nature and Number of inspections		No.	Notices served		Results of serving notices
			Statutory Notices	Other Notices	
British 424	Defects in original construction ...	Nil	Nil	Verbal intimations 47	26 defects remedied
	Defects, wear and tear ...	15			
	Dirt, vermin, pre-judicial to health	32			
Other Nations 282	Defects in original construction ...	Nil	Nil	Verbal intimations 49	29 defects remedied
	Defects, wear and tear ...	8			
	Dirt, vermin, pre-judicial to health	41			
Total 706		96	Nil	96	55 defects remedied

(xiv) Public Health (Shell fish) Regulations, 1934 and 1948.

There are both mussel and cockle layings in the port area, the main beds being off Lytham St. Annes on the north side of the river and between Southport pier and Formby point on the south side.

Mussel gathering is controlled by the Preston (Shell fish) Regulations, 1923.

During the year no mussels have been received or dealt with by the Mussel Beds at Lytham. Imported mussels have so affected the trade that fishermen have discontinued this service and the possibility of closure of the cleansing station is under discussion.

**(xv) Medical Inspection of Aliens.**

The Port of Preston is not approved for the landing of aliens and none of the medical staff holds a warrant of appointment as a Medical Inspector of Aliens.

Aliens, however, are entering the port in small but increasing numbers. A total of 45 arrived during the year.

**(xvi) Arrangements for the burial on shore of persons who have died on board ship from infectious disease.**

Arrangements for the interment of a deceased member of the crew of any vessel would be the concern of the shipping agent and the following procedure would be adopted in the event of a death from infectious disease. The Superintendent of Mercantile Marine acting for the Ministry of Transport would be notified immediately. The body would be removed by the Health Department staff to the mortuary of the Preston Isolation Hospital for the purpose of local enquiry and verification of the cause of death.

**(xvii) Food Inspection.**

Food voluntarily surrendered.

The quantity of bananas, grape fruit and coconuts surrendered as unfit for human consumption arriving at Preston from the West Indies and onions surrendered arriving at Preston from Mediterranean ports, amounted to 173 tons 12 cwts. 9 lbs. " Argentine " corned beef surrendered from the Buffer Depot at the Docks amounted to 36 lbs.

**(xviii) Importation of Livestock from Ireland.**

No cattle were imported during the year.



## Welfare Services

### **Residential and Domiciliary Welfare Services for Handicapped Persons.**

The Welfare Services under the National Assistance Act, 1948, are administered by the Homes, Hostels and Welfare Services Sub-committee which deals with the provision of residential accommodation for the aged and infirm and others in need of care and attention, the provision of temporary accommodation for persons in urgent need of such accommodation, the registration and inspection of disabled persons' and old persons' homes provided otherwise than by the local authority, and with the provision of welfare services for the blind, deaf and dumb, crippled and others suffering from disabilities.

Residential accommodation is provided by the Council in accordance with a scheme made under Section 21 of the Act, and welfare services for all classes of handicapped persons are provided in accordance with schemes made under Section 29 of the Act.

### **Residential Accommodation.**

#### **Corporation Hostels.**

Some six years ago consideration and ultimate approval in principle were given to a scheme which did not tread the orthodox lines so far followed in the care of old people.

It was clear then that the old premises at Fulwood would lend themselves admirably to adaptation bringing them up to modern standards of accommodation, and that the modernised premises would readily solve the problems associated with the residential care of the older physically handicapped and those who by reason of age were frail physically or mentally. Events have shown the value to the town of the provision that has been made since then at the Fulwood Hostel.

Equally the provision made at Ashton was by its very nature designed for the healthy aged and was meeting the problem of loneliness rather than of frailty. Whilst there was no lack of demand for accommodation in both hostels investigation brought out the fact that many old people especially married couples were anxious to cling together and maintain a home of sorts in the outside community.

There was therefore devised the scheme for the erection of a new hostel of orthodox pattern and function but with in addition two wings containing flatlets. The hostel was intended to provide standard accommodation for men and women seeking this form of care. The flats were intended particularly for married couples who would maintain an independent life as long and as far as possible. It was planned to supply the flats with central heating and hot water from the hostel on the principle that warmth is a fundamental need of old age and also in times of temporary sickness meals and other aids to recovery could be provided from the hostel. This comprehensive scheme has met with much administrative obstruction and delay but ultimately approval was given to the erection of the hostel itself and this was opened in October by the Chairman of the Health Committee, Alderman A. Wilson, after whom it is named Wilson House.

### **Wilson House.**

This new brick-built hostel situated at the junction of Gamull Lane and Ribbleton Avenue has accommodation for thirty-six persons in eight single and fourteen double rooms. In addition to the usual ancillary rooms there is a lounge, a dining-room and a writing-room. Television and radio are provided. The hall also functions as a smoke-room for men. A pronounced feature of the building is the amount of natural light which is provided in all parts.

It has been felt that the greater demand for accommodation for women justifies a sex ratio of admissions of not more than two women to one man. Twenty-five persons were in residence at the end of the year.

### **Fulwood Civic Hostel.**

Fulwood Civic Hostel continues to provide the main accommodation of approximately 300 places. Further measures for its complete modernisation were implemented during the year. The men's side has now been adapted to include five bedrooms accommodating two to four persons, and a hairdressing saloon, whilst the sanitary arrangements have been modernised throughout and the main wards fitted with wash-hand basins and wall mirrors. All floors have been relaid and wall plastering done throughout.

In the women's quarters the modernisation of the whole of the sanitation is now complete. Some of the rooms have been divided off into smaller units and great progress has been made with the plastering of the rooms.

### **Ashton Civic Hostel.**

A number of changes in the residents occupying accommodation have taken place over the past year mainly owing to the transfer of certain residents at their own request to the new hostel that was opened in Gamull Lane, and the consequent admission of persons from the waiting list. At the end of the year 42 places out of a maximum of 44 were occupied leaving vacancies for one man and one woman.

### **Further hostel provision for the aged.**

During the year plans were devised for the conversion of the old children's homes at Brockholes View to a residential hostel accommodating eighteen women. This conversion is likely to be completed in 1956 after which the hostel needs of old people in Preston will probably be fully met.

### **Other Homes and Hostels.**

The policy has been maintained of placing handicapped persons in hostels best suited to their needs. All the accommodation offered by the Institute for the Blind at their hostel in Penwortham has been immediately and gratefully accepted. Accommodation for epileptics has been obtained mainly at Langho and Maghull though cases are admitted elsewhere as occasion demands.

It is clear that no matter how much classification is carried out there is always a residue of people who are considered unsuitable for admission to specialised residential accommodation whether this be a hospital or a hostel. The dividing line between sickness and infirmity is frequently blurred and the



### III

physical and mental qualities of old people fluctuate easily from week to week. In consequence, Fulwood Hostel has proved of immeasurable assistance in dealing with persons for whom accommodation could not be obtained elsewhere.

Table 75 shows the number of people, classified according to handicap, in various hostels at the end of the year.

**Table 75.**  
**Persons resident in accommodation on 31st December, 1955.**

Description of persons accommodated	In premises managed by Council		In accommodation provided on behalf of the Council				No. of persons accom- modated for whom other local auth- orities are responsible		Total No. of persons for whom the Council are respon- sible	
			By other local authorities		By voluntary organisa- tions					
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Aged—										
(a) not materially handi- capped by infirmity ...	85	78	—	—	—	—	9	4	76	74
(b) physically or mentally infirm ... ..	29	46	—	—	—	—	2	8	27	38
Blind ... ..	8	7	—	—	1	11	1	—	8	18
Deaf or Dumb ... ..	2	—	—	—	—	—	1	—	1	—
Epileptic ... ..	1	—	3	5	2	1	—	—	6	6
Crippled ... ..	12	2	—	—	—	—	1	—	11	2
Physically Infirm (not being aged) ...	3	4	—	—	—	—	1	—	2	4
Mentally Infirm (not being aged) ...	5	11	—	—	—	—	2	2	3	9
Total ... ..	145	148	3	5	3	12	17	14	134	151

### Reception Centre.

The reception centre situated near to the Fulwood Civic Hostel provides nightly shelter for 42 men and 4 women without a settled way of living ; accommodation was previously provided for women wayfarers in a separate room in the main hostel until November, 1953, when a new centre adjacent to the men's was opened.

Less use has been made of the reception centre during the year than in any of the previous four years. Younger persons are now using the centre and although efforts are made to persuade them to leave the road and seek employment the

results are not encouraging. Close liaison is maintained with the National Assistance Board and also with the Ministry of Labour and National Service on this problem.

**Table 76.**  
**Persons accommodated in the Reception Centre, Fulwood, 1955.**

Month	Men	Women	Children under 16	1955 Total	1954 Total	1953 Total	1952 Total	1951 Total
January ...	950	11	—	961	924	983	872	930
February ...	874	23	—	897	830	774	857	847
March ... ..	921	11	—	932	1,010	993	992	953
April ... ..	1,036	37	—	1,073	1,046	997	1,006	944
May ... ..	937	23	—	960	1,064	1,042	1,090	1,020
June ... ..	929	23	—	952	1,045	1,029	906	920
July ... ..	866	16	—	882	1,076	1,058	931	934
August ... ..	889	14	—	903	1,136	997	1,042	1,049
September ...	790	16	—	806	1,036	961	959	947
October ... ..	889	12	—	901	1,047	1,005	872	919
November ...	864	13	—	877	963	986	842	915
December ...	812	14	3	829	904	894	763	829
Grand Total	10,757	213	3	10,973	12,081	11,719	11,132	11,207

### Temporary Accommodation.

Accommodation for persons rendered homeless was provided in two out-buildings at the Civic Hostel, Fulwood, and from March, 1953, in the premises No. 1 Maudland Bank, where accommodation is available for four or five families dependent on the size of the family.

The number of families admitted to temporary accommodation during the year was 8, comprising 8 women and 19 children, making in all 27 persons. This is a slight increase on 1954 when 7 families comprising 21 persons were admitted to temporary accommodation.

The purchase and adaptation of No. 1 Maudland Bank has been fully justified by the results obtained. Families have been able to live together as entities and, with the supervision and encouragement given by members of the staff, no serious difficulties have had to be faced. No arrears of the charge for accommodation have accrued. Two families were considered sufficiently rehabilitated and were rehoused by the Corporation during 1955.



The table below indicates the number of persons remaining in temporary accommodation on 31st December, 1955 :—

**Table 77.**  
**Persons in temporary accommodation.**

Description of persons accommodated	In premises managed by Council		In accommodation provided on behalf of the Council		No. of persons accommodated for whom other local authorities are responsible		Total No. of persons for whom the Council are responsible	
			By other local authorities	By voluntary organisations				
	M.	F.	M.	F.	M.	F.	M.	F.
PERSONS OVER 16—								
(a) evicted ...	2	5	—	—	—	—	2	5
(b) others ...	1	5	—	—	—	—	1	5
ACCOMPANIED CHILDREN—								
(a) evicted ...	16		—	—	—	—	16	
(b) others ...	17		—	—	—	—	17	
Total ...	46		—	—	—	—	46	

### **Welfare of handicapped persons.**

#### **Blind and partially sighted.**

St. Jude's Parish Hall, St. George's Road, has continued to be used on Tuesday and Wednesday afternoons as a social centre for blind and partially sighted persons. The three home teachers give instruction each day on which the centre is open on the following handicrafts : hand-loom weaving, basket-making, rug-making, knitting, making of soft toys, string bags, stool seating, coral necklaces and nylon flowers. During the year an average of 48 persons have received instruction each day the centre has been open, and in all 2,807 lessons have been given during the year.

The home teachers have continued to visit the homes of blind and partially sighted persons to promote their well-being and to instruct them in methods of overcoming their disabilities. 6,375 of these visits have been made during the year and 14 blind persons unable to attend the social centre received instruction in handicrafts at home.

Before a person is included in the classified register maintained by the Council, each person is examined by an ophthalmologist and during the year

48 persons were thus examined, of whom 33 were pronounced blind and 11 partially sighted, whilst the remaining four were found to be not blind or partially sighted and spectacles were prescribed to correct their vision. Four partially sighted persons who were re-examined were found to be still partially sighted.

196 cases are provided with wireless sets or rediffusion service through the British Wireless for the Blind Fund, and the Braille library service is used by several blind persons in the borough. All newly registered blind persons are assisted in learning to read embossed type, but unfortunately many older blind folk have lost the sensitiveness of touch essential to successful reading.

Monthly concerts are held in winter in St. Jude's for blind persons and the staff organised the usual Christmas Party and two outings during the summer months. Each registered blind person or partially sighted person is invited to attend the Garden Party held in the grounds of the Civic Hostel, Fulwood, each year.

### **Employment.**

The Workshops for the Blind, Fulwood, provided regular employment for 23 registered blind persons, and during 1955 there was no unemployment in any of the departments.

One blind person is undergoing training at the Workshops for the Blind, Fulwood, in rush seating and wire-drawn brushes; another is training at the School for the Blind, Liverpool, in brush-making.

The employees at the Workshops are covered by a Scheme of Payment and Conditions of Service under which a guaranteed minimum wage is payable and which also provides for an incentive bonus system on all earnings above a fixed minimum level.

Two retired workshops employees are enjoying the benefits of the non-contributory pension scheme operated by the Council.

Twenty-three blind persons are employed in open industry, three are self-employed.

The placement of blind persons in employment, previously carried out by the placement officers of the Royal National Institute for the Blind, was taken over as a direct service on the 1st April, 1953. Visits have been made to several firms in Preston to ascertain whether there were any tasks or operations which could be suitably adapted so that they could be performed by blind persons. Very close liaison on this difficult problem was maintained with the appropriate officials of the Ministry of Labour and National Service.

### **Deaf and Hard of Hearing.**

The North and East Lancashire Welfare Association for the Deaf provides a full range of services for registered deaf persons and the Health Committee has continued to use this organisation as their agents in promoting the welfare of this class of person. The Council assist the Association financially and during



the year the contribution was at the rate of £10 0s. 0d. per annum for each registered deaf person residing within the Borough, who is also a member of the Association, but excluding those persons already covered by alternative welfare schemes, e.g., Deaf/Blind, Schoolchildren, persons resident in Part III accommodation, and in hospitals. Last year a contribution was paid in respect of 74 persons.

The Association maintains its own premises and employs staff specially trained in the needs of deaf persons and competent to fully converse with and interpret through manual means the conversation of the deaf. In addition to spiritual and recreational services the Association affords opportunities for placement in industry, industrial welfare and visiting of the infirm and sick.

### **Other Handicapped Classes.**

The Council's scheme for the provision of welfare services for handicapped persons other than the blind, partially sighted and deaf persons, approved by the Minister of Health in August, 1952, enabled the Council to extend its activities to this class of person.

As a start to the implementation of the scheme a social centre in St. Jude's Parish Hall was opened in May, 1953. Meetings are held on Monday afternoons where these persons can attend for handicraft instruction or for a social outing and a general talk with other people. The average number of persons attending was 12. Two instructors were engaged in a part-time capacity and visit the homes of those handicapped persons who are house-bound. 22 persons are being visited at home and are receiving instruction in simple pastime occupations, and are thus encouraged to pass the hours of loneliness in usefulness and pleasure.

For the third year in succession a Christmas Party was organised and arranged by the staff and was a successful social event. Assistance in the transport of these people was given by various members of the public. Monthly concerts are held in the winter at St. Jude's Parish Hall also.

All along however it has been felt that there was a need for specially designed premises where there could be established a club for the general use of the handicapped and to this end approval was finally obtained and the site preparations for the erection of a new building were commenced late in the year.

Active co-operation has continued with the Ministry of Labour and National Service in relation to the provision of employment for the physically handicapped.

The Council also assisted four persons in meeting the cost of adaptations to their premises so that they could gain access to their homes in wheelchairs more easily.

Details of persons included in the various registers of handicapped persons are shown as follows :—

<div>Table 78.</div> <div>Number of persons registered on 31st December, 1955, in accordance with handicap and age group.</div>							
Age Group	Sex		Blind	Partially Sighted	Deaf	Hard of Hearing	Other handicapped persons
1+	Male	...	—	—	1	—	7
	Female	...	—	—	1	—	7
5+	Male	...	—	2	7	2	25
	Female	...	2	1	1	1	27
10+	Male	...	2	1	6	2	46
	Female	...	—	3	1	—	42
15+	Male	...	3	1	2	1	29
	Female	...	1	1	2	1	23
20+	Male	...	5	1	9	1	20
	Female	...	1	—	4	5	19
30+	Male	...	9	—	6	3	18
	Female	...	7	—	9	4	22
40+	Male	...	13	1	10	2	25
	Female	...	13	1	5	4	20
50+	Male	...	16	2	3	7	28
	Female	...	34	2	4	16	23
60+	Male	...	11	—	2	4	3
	Female	...	16	3	4	6	7
65+	Male	...	12	1	3	5	8
	Female	...	19	1	3	5	7
70+	Male	...	65	2	5	11	11
	Female	...	130	20	4	17	27
	Total	...	359	43	92	97	444

### Domiciliary Visiting and Care.

A fairly considerable amount of home visiting of the aged is now carried out by health visitors principally in association with requests for help in some form or another. One woman officer on the staff of the welfare services division is engaged almost whole-time and two men devote part of their time into enquiries of a special nature such as projected hostel admissions, care of property and the like.

The Preston Council of Social Service has continued to provide for the visiting of old persons who want a regular friendly visit and various other religious groups and voluntary organisations when approached have helped over individual cases.



## Protection of Property.

The moveable property of three persons admitted to hospital or Part III accommodation was protected by the department, but it was not necessary to remove the furniture from the house in any of the cases. The houses were securely fastened and arrangements made for police surveillance. The National Assistance Board issued an allowance to pay the rent in one case whilst the person was in hospital.

In a further two cases personal property other than furniture was placed in safe keeping.

## Interments.

Section 50 of the National Assistance Act makes provision for the burial or cremation of deceased persons, where no suitable arrangements have already been made, and empowers the Council to recover expenditure from the National Insurance funds where applicable, or from the person's estate.

During 1955, 16 interments were arranged compared with 9 in the previous year, and recoveries were effected wherever possible.

Interments are arranged in accordance with set recommendations with agreed scales of charges.

The Ministry of National Insurance regulations at present provide that no man aged 65 or woman aged 60 on the appointed day 5th July, 1948, can qualify for a Ministry of National Insurance Death Grant. There appears to be little likelihood therefore of this duty decreasing for many years to come.

**Table 79.**  
**Follow-up of Registered Blind Persons.**  
**January 1st—December 31st, 1955.**

	Cause of Disability				
	Cataract	Glaucoma	Retrolental Fibroplasia	Others	Total
1. No. of cases registered during the year in respect of which para. 7c of Form B.D.8 recommends :—					
(a) No Treatment ..	9	1	—	7	17
(b) Treatment (medical, surgical or optical) ..	7	2	—	7	16
Total .. ..	16	3	—	14	33
2. No. of cases at 1(b) above which on follow-up action have received treatment	3	2	—	7	12

**Table 80.**  
**Follow-up of Registered Partially Sighted Persons**  
**January 1st—December 31st, 1955.**

	Cause of Disability				
	Cataract	Glaucoma	Retrolental Fibroplasia	Others	Total
1. No. of cases registered during the year in respect of which para. 7c of Form B.D.8 recommends :—					
(a) No Treatment ..	1	—	—	3	4
(b) Treatment (medical, surgical or optical) ..	4	—	—	4	8
Total .. ..	5	—	—	7	12
2. No. of cases at 1(b) above which on follow-up action have received treatment	3	—	—	4	7



## APPENDIX I.

### COUNTY BOROUGH OF PRESTON.

#### NATIONAL HEALTH SERVICE ACT, 1946.

MODIFICATIONS OF THE COUNCIL'S EXISTING PROPOSALS WITH REFERENCE TO SECTIONS 27 AND 28 OF THE NATIONAL HEALTH SERVICE ACT, 1946.

#### AMBULANCE SERVICE. Revised Form of Proposals.

##### 1. Administration.

###### (i) Chain of Responsibility.

- (a) The Council's functions under Section 27 of the Act have been delegated to the Health Committee which directs policy through its full Committee.
- (b) The Medical Officer of Health is in charge of the Ambulance Service and a Station Officer exercises day-to-day control.

##### 2. Existing Services.

###### (i) Ambulance Station.

The Ambulance Station is situated in Argyll Road, Preston, in premises adjoining the main workshops and garage of the Corporation Transport Department.

###### (ii) Vehicles.

The present ambulance fleet consists of 10 vehicles, 7 ambulances all capable of carrying 2 or more stretchers and 3 sitting-case vehicles. In view of the changing nature of the work it is proposed to replace one ambulance by a sitting-case vehicle, making 6 ambulances and 4 sitting-case vehicles. This is regarded as the minimum number required to provide an efficient service. No increase in the fleet is contemplated at present, but if necessary, to meet any increased need the Council will provide up to 2 additional vehicles, or such other numbers as the Minister of Health may from time to time approve.

Repair and maintenance of the vehicles are carried out generally at the Corporation Transport Department's adjacent garage.

###### (iii) Staff.

The present establishment consists of a Station Officer, 21 driver/attendants, and 3 telephonists. In addition, 2 driver/attendants are employed on holiday relief duties. All the permanent vehicle crews are required to possess a First-Aid Certificate which must be renewed by study and examination at intervals of not longer than 3 years. New entrants are required to attend classes arranged by the St. John Ambulance Brigade

and to obtain the First-Aid Certificate. Arrangements also exist with the St. John Ambulance Brigade for the holding of refresher courses and subsequent examinations.

The number of staff at present employed is regarded as the absolute minimum to provide an efficient service and if necessary in the future the Council will increase this number by up to 4 driver/attendants or such other numbers as the Minister of Health may from time to time approve. All driver/attendants will be so trained as to be interchangeable in their duties.

### **3. Arrangements with other organisations and authorities.**

- (i) There is no agency arrangement with voluntary organisations.
- (ii) Arrangements exist with the Lancashire County Council for mutual assistance in emergency on request.

### **4. Operational arrangements.**

#### **(i) Infectious Diseases arrangements.**

Disinfection of ambulances used for the transport of infectious cases is carried out by efficient ventilation of the vehicle and the washing of the interior of the main compartment. Fomites are retained at the Isolation Hospital.

#### **(ii) Call-out arrangements.**

The service is available normally only on a requisition signed by a medical practitioner or midwife or in respect of hospital cases by an appropriate senior staff member. Emergency calls are accepted from all sources and telephone kiosks carry instructions on the making of these calls.

#### **(iii) Emergency arrangements.**

Arrangements have been made with the Lancashire County Council for mutual aid in the event of an emergency arising.

Personnel off duty and required in an emergency would be summoned personally through the police and by such other means as may prove expedient.

#### **(iv) Arrangements for rail transport.**

Where rail travel is considered suitable appropriate arrangements are made with the Invalid Rail Service of the British Railways and with the ambulance authority for the area where the patient's rail journey terminates. Where it is desirable, special stretcher gear is used.

Approved by the Minister of Health, 23rd December, 1955.

## **MENTAL DEFICIENCY.**

### **Additional Proposal.**

“ The Council may make arrangements for short holidays or outings or expeditions for defectives who are under supervision or guardianship if it appears to the Council that benefit would be derived from such arrangements, that the defectives would not otherwise have holidays, and that their selection is in other respects suitable. The Council must pay the whole or part of the cost incurred.”

Approved by the Minister of Health, 28th December, 1955.



## APPENDIX II

---

### A REPORT ON THE EXTENT OF UNFIT HOUSING IN THE COUNTY BOROUGH.

---

#### **Historical Note.**

The housing conditions in which the people live have been a main pre-occupation since the dawn of modern local government in Lancashire no less than in other areas where the industrial revolution had made its mark.

Where an offence is commonplace it is not often the subject of contemporary headlines unless it has been spotlighted by some specific demand or incident. As a consequence the annual report for 1882—the first year in which a whole time Medical Officer of Health functioned in Preston—and those for the immediately ensuing years refer only incidentally to the closure of uninhabitable cellars, the conversion of privies and the like, but makes specific mention of the setting up of a systematic house to house inspection in each of the three sanitary districts of the town. A small block of property was marked out in each case and carefully examined. In the succeeding years although closure and demolition of uninhabitable houses took place with fair regularity it is only in the last 25 years that material progress has been made in the elimination of large blocks of unfit property. The last of the 19th century cellar dwellings in Kirkham Street and Moss Street off Fylde Road were dealt with as part of a clearance area as late as 1934 and two earth closets have been eliminated in the last five years.

Complete records of demolitions and closing of unfit houses since 1930 are available and the annual figures are set out in Table I.

## The Survey of 1955.

During the past year a general survey of housing in the town has taken place and it is apparent that the growth and development of the town during the past 150 years have been such that almost the whole of the unfit housing falls within the central and inner zones delimited peripherally by Skeffington Road, St. George's Road, Aqueduct Street, Strand Road and that part of the Ribble linking the southern extremities of the arc formed by these streets. Only a few houses and those mainly of the individually unfit type fall outside these zones.

A detailed survey of the houses within the area in question shows that 6,153 are unfit houses suitable for demolition. This report does not deal with houses which are unfit, but can be made fit by major repair as contemplated by Section 9 of the Housing Act, 1936, and such houses are not included in any figures given in this report. No further reference will be made in the report to this large and important group of unfit houses.

The standard of fitness used in arriving at a decision is that embodied in the Housing Repairs and Rents Act, 1954, Section 9 and whilst all the houses included in the figure of 6,153 failed to achieve the standard some failed to a greater extent than others. It is manifest that the clearance of all these houses and the rehousing of their occupants is not an immediate practicable possibility. Regard therefore has been given to some form of priority of need solely in terms of fitness for human habitation of the dwelling houses and it is considered that 2,629 dwelling houses require immediate attention. Of this number 201 have already operative orders against them and 268 fall within clearance areas approved by the Council at its last meeting.

The remaining 3,524 unfit houses could reasonably be dealt with in a second phase of clearance.

Since the end of the second world war the Council, as will be seen from Table I have declared three clearance areas involving 457 houses and 499 families. Only the twenty houses in the Mount Pleasant Area have been demolished so far and analysis shows that of the 24 families occupying the houses 21 were rehoused by the Corporation and three found alternative accommodation otherwise than in Corporation controlled property.

Six families consisted of solitary persons and four of these were rehoused by the Corporation.

The figures bracketed in column 5 of Table I indicate that only slight movement of families from the Brunswick Street Area has taken place so far. Four houses have fallen empty since the official count of persons took place in February, 1954. Of the four families concerned three main tenants were rehoused by the Corporation.

Table II shows the number and size of certain families in the three areas and Table III shows the disposition of families affected by demolition at Mount Pleasant and closure at Brunswick Street.



**Table 1.**  
**Housing Acts — Unfit houses dealt with from 1930 — June, 1955.**

1 Year	2 By Demolition Orders		3 By undertakings not to Let		4 By Closing Orders under Local Government (Misc. Prov.) Act, 1953	5 By Clearance Areas	6 Total houses dealt with
	(a) Houses still standing	(b) Houses demolished	(a) Subsequently demolished	(b) Still standing			
1930	—	12	—	—	—	114	126
1931	—	1	—	—	—	—	1
1932	—	4	9	8	—	84	105
1933	—	5	5	3	—	—	13
1934	—	22	—	4	—	63	89
1935	—	62	—	5	—	—	67
1936	—	6	—	—	—	—	6
1937	—	41	—	—	—	—	41
1938	—	37	—	4	—	212	253
1939	1 (1)	52	—	—	—	—	53
1940	—	3	—	—	—	—	3
1941	—	—	—	—	—	—	—
1942	—	—	—	—	—	—	—
1943	—	4	—	—	—	—	4
1944	—	1	—	—	—	—	1
1945	—	7	—	—	—	—	7
1946	—	7	—	1	—	—	8
1947	1	3	—	2	—	—	6
1948	—	13	1	3	—	—	17
1949	—	20	—	1	—	—	21
1950	3 (1)	10	—	3	—	—	16
1951	—	12	—	2	—	20	34
1952	1	4	—	3	—	—	8
1953	7 (2)	6	—	6	3	—	22
1954	7 (4)	—	—	—	4	—	11
1955**	14 (13)	—	—	—	5	169 (165)	188
TOTALS ...	34 (21)*	332	15	45	12	662 (165)*	1100

\* The figures in brackets represent the number of houses still occupied at 30th June, 1955.

\*\* Clearance Areas involving 268 houses have been approved but the orders have not yet been made.





<div>Table II.</div> <div>Post War Clearance Areas.</div> <div>The number of Houses and the number and size of certain Families housed therein.</div>				
Area	Total number of houses	Total number of families	Total number of single unit families	Total number of two unit families
(a) Mount Pleasant West Area ...	20	24	6	3
(b) Brunswick Street, etc., Area ...	169	192	33	50
(c) Lodge Street, etc., Area ...	268	283	84	67
	457	499	123	120

<div>Table III.</div> <div>Disposition of Families affected by Demolition or Compulsory Purchase Orders.</div>		
	Mount Pleasant Area	Brunswick Street Area
Number of families rehoused by Corporation...	21	3
Number of families finding alternative accommodation ...	3	1
Number of houses demolished or now empty...	20	4

About half the families involved in these three areas are one or two unit in size, a circumstance arising partly as an effect of the post war policy of rehousing first the larger families and partly as a normal sociological event of the slow decay of the old central areas of house property in which live many people who have occupied the same houses for many years, whose families have grown up and scattered and who, themselves, are now in the evening of their affairs.

Since the unfit houses under consideration all tend to be of the same type, namely old houses in the central or inner zones fallen into senile decay, the

pattern of family in residence is not likely to differ very materially from the sample of 457 houses reviewed.

It is unlikely that the whole of this group will want or need rehousing on Corporation new estates and it seems fair to assume that any moral liability for rehousing falling on the Corporation is unlikely to exceed by much the extent of the legal responsibility, that is the equivalent of the actual number of houses to be demolished.

### **Housing repairs and Rents Act, 1954.**

The local authority is required by the Housing Repairs and Rents Act, 1954, Section 1 to submit proposals for dealing with houses which appear to the authority to be unfit for human habitation and with any other houses which are or in the opinion of the authority ought to be included in clearance areas. The following information is now available to comply with the requirements of Ministry of Housing and Local Government Circular 55/54 which relates to the Act.

The total number of permanent dwellings in the local authority's areas determined in the Local Valuation Roll at the 1st April, 1955, was 37,141.

#### **Part 1. The Total Problem.**

- |   |        |                           |
|---|--------|---------------------------|
| (i) Estimated number of houses unfit for human habitation within the meaning of Section 9 of the Housing Repairs and Rents Act, 1954, and suitable for action under Section 11 or Section 25 of the Housing Act, 1936 | ... .. | 6,153                     |
| (ii) Period of years which the Council think necessary for securing the demolition of all the houses in (i)   | ... .. | [25]                      |
|   |        | Impracticable to forecast |

#### **Part 2. Orders already made, etc.**

- |   |        |     |
|---|--------|-----|
| (iii) Number of houses in (1) in clearance areas and already covered by operative clearance or compulsory purchase orders, or owned by the local authority                              | ... .. | 201 |
| (iv) Number of houses which are already in clearance areas and for which clearance or compulsory purchase orders have been submitted to the Minister, but have not yet become operative | ...    | Nil |

#### **Part 3. Action in the first five years.**

- |   |  |         |
|---|--|---------|
| (v) Number of houses which are already in clearance areas and for which clearance or compulsory purchase orders are to be made or which are to be purchased by agreement within the five years  |  | 268     |
| (vi) Number of houses which are to be included in clearance areas still to be declared and which within the five years will be owned by the local authority, or will have been included in a clearance order or a compulsory purchase order submitted to the Minister |  | [2,160] |

The answer which will be a number less than 5,685, will depend *inter alia* on the extent to which the authority is able to provide or secure the provision of alternative accommodation. It is suggested that the figure 2,160 is appropriate.



(vii) Number of houses under (iii), (iv), (v) and (vi) to be patched (if necessary) and retained within the five years under Section 2 of the Housing Repairs and Rents Act, 1954, for temporary accommodation ... .. [1,379]

The answer to this question depends on the policy to be adopted by the Council. On the practical aspect of patching it may be said that the character of the property concerned is such that large scale repairs would be inadvisable and that the only patching to be recommended would be that which kept the house weatherproof, that is to say the standard which is at present asked of owners of property likely to be condemned in the fairly near future.

(viii) Number of houses under (iii), (iv), (v), and (vi) to be demolished in the five years ... .. [1,250]

This again is largely dependant on Council policy on rehousing.

(ix) Number of houses (including those already comprised in operative demolition orders) to be demolished in the five years as a result of action under Section 11 of the Housing Act, 1936 ... 65

The figures shown in brackets at Part I (ii) and Part III (vi), (vii) and (viii) were subsequently added on the instruction of the Council for the purposes of their proposals submitted under Section 1 of the 1954 Act.

## APPENDIX III.

---

Copy of the Preston (Central Area No. 1) Smokeless Zone Order, 1955, as confirmed with modification by the Minister of Housing and Local Government on the fifteenth day of December, 1955.

---

COUNTY BOROUGH OF PRESTON.

---

### **PRESTON CORPORATION ACT, 1952.**

---

#### THE PRESTON (CENTRAL AREA No. 1) SMOKELESS ZONE ORDER, 1955.

The Mayor, Aldermen and Burgesses of the Borough of Preston, acting by the Council (in this Order referred to as “ the Corporation ”) pursuant to the provisions of Section 29 of the Preston Corporation Act, 1952, hereby make the following Order :—

1. This Order may be cited as the Preston (Central Area No. 1) Smokeless Zone Order, 1955.

2. In this Order the expression “ the map ” means the map prepared in duplicate and sealed with the common seal of the Corporation and marked “ Preston (Central Area No. 1) Smokeless Zone Order, 1955,” of which one copy is deposited at the offices of the Corporation at the Town Clerk’s Office, Municipal Building, Preston, and one copy is deposited at the office of the Minister of Housing and Local Government.

3. The emission of smoke is hereby prohibited from all premises situated in the area of the County Borough of Preston described in the Schedule hereto and shown coloured pink on the map.

4. (1). The tenant of any premises incurring expense in executing works or in providing, altering or adapting any fixtures fittings or appliances for the



purpose of complying with the provisions of this Order, and the owner of those premises, may enter into and carry out an agreement making such variations in the terms of the tenancy of the premises as may be reasonable having regard to the expense incurred and to other relevant circumstances.

(2). Any such tenant who has been unable to make such an agreement may apply to the County Court within the jurisdiction of which the premises are situated for an order making such variations of the terms of the tenancy as aforesaid and upon any such application to the County Court the Judge may make such order as he thinks fit.

5. For the purposes of sub-section (3) of Section 29 of the Preston Corporation Act, 1952 (which provides that " authorised fuel " means coke, anthracite and other approved fuels), " Coalite," " Phurnacite " and " Rexco " are hereby specified as authorised fuels for the time being approved by the Corporation.

6. This Order shall come into operation on the first day of July, 1956.

#### SCHEDULE.

The area of the County Borough of Preston which lies within a line commencing at a point in the centre of North Road opposite the centre of High Street and proceeding southward along the centres of North Road and Tithebarn Street to Fell Street, thence eastward along the centre of Fell Street to North Road, thence southward along the centre of North Road to Church Street, thence westward along the centres of Church Street and Fisbergate to the easterly boundary of British Railways, thence northward and generally north-eastward following that boundary (but including the stableman's house and other buildings in the coal sidings to the north-west of Corporation Street) to Corporation Street opposite the centre of Wharf Street, thence eastward along the centre of Wharf Street to Lune Street, thence northward along the centre of Lune Street to Friargate, thence eastward along the centre of Friargate to the westerly boundary of No. 162, Friargate, thence northward and north-eastward along the westerly boundary of No. 162, Friargate, the westerly and north-westerly boundaries of the Royal Hippodrome and the north-westerly boundary of Scout Motor Services Limited to Market Street, thence north-eastward across Starch-house Square to the Junction of Lawson Street and High Street, thence north westward and eastward along the centre of High Street to the point of commencement.











COUNTY BOROUGH OF PRESTON  
LOCAL EDUCATION AUTHORITY

# A REPORT

OF THE

## School Medical Officer

on the health of the school children  
and on the work of the school health  
service for the year  
1955.

# INTRODUCTION

*To the Chairman and Members of the Special Services Sub-committee of the Education Committee.*

The school health service offers considerable scope for the investigation and correction of factors that may play a part in affecting the health of the schoolchild and in consequence his capacity for acquiring education suitable to his needs, but this scope in turn is dependent on the availability of the appropriate skilled staff and the ancillary premises and equipment.

The committee has always been reasonable in its attitude towards the provision of equipment which in consequence has constituted the least problem. In recent times there has been an improvement in clinic accommodation so that both the standard and quantity of work done have risen, and in the current year staffing problems have been less than usual so that only the dental and physiotherapy services have been badly understaffed.

The existence of a full medical staff throughout the whole of the year permitted some study being given to the ascertainment of partial deafness occurring in schoolchildren and this matter is reported on in a succeeding chapter. Similarly the opportunity was taken of introducing as a routine, vision testing of eight-year-old children.

These two screening measures are designed to pick up children who may be suffering from a hitherto unnoticed defect which can subsequently be investigated more thoroughly by other means to determine its precise significance and to enable where necessary the institution of active measures for its correction or alleviation.

Generally speaking the health of the schoolchildren has remained good and at least so far as physical health is concerned rich rewards are now being reaped from modern social welfare policy. In more specific aspects of health it may be noted that the fairly high endemicity of ringworm prevailing some years ago appears finally to have been conquered whilst there is some reduction in the occurrence of impetigo, which with the gradual reduction in the number of slum houses and slum schools could reasonably be expected. These factors no doubt also have played a part in reducing the incidence of louse infestation to the lowest figure recorded in the past eleven years, though the departmental staff concerned have been as fully and as vigorously engaged as ever.

The facilities for skilled diagnosis and for special educational treatment are now comprehensive in character and reasonably adequate in amount. Waiting lists especially in relation to speech therapy have been greatly reduced and the placement of ascertained handicapped children in educational surroundings appropriate to their needs is much improved except in respect of accommodation for educationally subnormal children where difficulty and delay in admission are now being experienced.

In other fields which vitally concern the health of children but lie outside the scope of the education authority's activities it has proved convenient on occasion to invite the co-operation of the committee as an aid to the efficient carrying out of the work involved. I am pleased to be able to express my gratitude to the teaching staffs who almost without exception and often at some inconvenience to their own work have willingly given of their help in the interest of their pupils.

J. S. G. BURNETT,  
*School Medical Officer.*



### School Population.

The table below shows the number and type of school in the borough and the number of children on the roll, on 23rd December, 1955.

<b>Table 81.</b> <b>School population.</b>							
Type of School						No. of Schools	No. on Roll
Primary and Secondary	...	...	...	...	...	75	16,267
Secondary Grammar	...	...	...	...	...	5	3,050
Secondary Technical	...	...	...	...	...	2	190
Special (Day)	...	...	...	...	...	2	210
Total	...	...	...	...	...	84	19,717

### Cost of School Health Service.

Expenditure	...	...	...	...	...	...	...	£35,280
Income	...	...	...	...	...	...	...	£21,608
Net Cost	...	...	...	...	...	...	...	£13,672

### Periodic Medical Inspection.

All children are given a routine general medical examination on at least three occasions during the period of their compulsory school age, viz., on entry, at about 11 years, and in the year prior to leaving school. By means of these routine examinations, it is possible (a) to assess the condition of each child, including the mental state and the home background, (b) to ascertain defects at a stage when they are otherwise unrecognised so that they may be prevented from becoming more serious. For the examination to be fully effective, particularly in the case of the five-year-olds and the eleven-year-olds, co-operation and consultation with the parent and teacher is necessary. The number and nature of defects found at these periodic inspections are shown in Table 84.

The following table is a summary of the children seen at periodic inspections.

**Table 82.**  
**Summary of children seen at periodic inspection.**

	No. of Children inspected	No. of occasions parent present	Percentage of parental attendances
Entrants ... ..	1,838	1,268	69.0
Second age-group ... ..	1,619	496	30.6
Third age-group ... ..	1,507	56	3.7
Other periodic inspections ...	1,147	126	11.0
Total ... ..	6,111	1,946	31.8

The nutritional state of the children examined is noted in Table 83.

**Table 83.**  
**Nutritional state of children examined.**

Age-Groups (1)	No. of Pupils Inspected (2)	A. (Good)		B. (Fair)		C. (Poor)	
		No.	% of col. 2	No.	% of col. 2	No.	% of col. 2
Entrants ... ..	1838	909	49.4	904	49.2	25	1.4
Second age-group ... ..	1619	754	46.6	840	51.9	25	1.5
Third age-group ... ..	1507	901	59.8	593	39.3	13	0.9
Other periodic inspections	1147	470	41.0	632	55.1	45	3.9
Total 1955 ... ..	6111	3034	49.6	2969	48.6	108	1.8
1954 ... ..	6827	3786	55.5	2914	42.7	127	1.8
1953 ... ..	6173	3236	52.4	2761	44.7	176	2.9
1952 ... ..	6608	3050	46.2	3350	50.7	208	3.1
1951 ... ..	5483	2153	39.3	3164	57.7	166	3.0
1950 ... ..	5702	2551	44.7	2923	51.3	228	4.0
1949 ... ..	5821	1991	34.2	3597	61.7	233	4.0
1948 ... ..	5818	1997	34.3	3663	62.9	158	2.7
1947 ... ..	4915	1385	28.1	3349	68.1	181	3.6

The number of children classified as unsatisfactory is the lowest recorded since 1947 and whilst the figures are based on the subjective opinions of six different doctors there are good grounds for believing that the results represent broadly the position, viz., that there are few schoolchildren in Preston today whose nutritional state is poor.



### **Special Inspection and Re-inspection.**

Certain children require more frequent supervision than at the periodic inspections, and others are referred for examination by the school medical officer during the period between the routine examinations. Such referrals may come from the parent, school nurse, head teacher or school welfare officer, and all these cases are seen at special inspection sessions in schools and clinics. These children can be considered as falling into three main groups : (i) those with minor defects and diseases, which are treated by the school nurse at the minor ailments sessions (examples of such conditions are cuts, boils, impetigo) ; (ii) those with more severe conditions requiring treatment that cannot be satisfactorily undertaken at the minor ailments sessions and are referred to the family doctor ; (iii) those with defects which the school health service has been specially developed to handle, e.g. defects of vision, certain nose and throat conditions, hearing defects, orthopaedic defects and mental backwardness.

Both in the routine and in special examinations, the condition of the children is considered particularly in relation to their educational environment and development, and it is the particular concern of the school medical officer to assess the need for special educational treatment and advise such where it is necessary. The ascertainment and disposal of children coming under the category of "Handicapped Pupils" is an important part of the work of the school health service.

At the time of the routine examination for school leavers, or at a special inspection nearer the actual time when the child leaves school, the school medical officers advise the Youth Employment Officer of any child who has a disability which it is considered may affect his or her future employment.

During the year 3,107 special medical inspections and 9,787 re-inspections were carried out by the medical staff at the special inspection sessions arranged at schools or at clinics. The number and nature of defects found at special inspections are shown in Table 84.

A material increase in the number of cases found at special inspections to require treatment for visual defect is a reflex of the routine screening now being carried out at eight years of age and constitutes earlier ascertainment rather than increased incidence.

**Table 84.**  
**Defects found at periodic or at special inspections.**

Defect or Disease	Periodic Inspections		Special Inspections	
	Number of defects		Number of defects	
	Requiring treatment	Requiring to be kept under observation but not requiring treatment	Requiring treatment	Requiring to be kept under observation but not requiring treatment
Skin ... ..	116	138	214	86
Eyes (a) Vision ... ..	301	195	424	151
(b) Squint ... ..	61	63	64	19
(c) Other ... ..	13	27	23	33
Ears (a) Hearing... ..	14	45	17	51
(b) Otitis Media ... ..	15	53	34	10
(c) Other ... ..	9	46	35	42
Nose or Throat ... ..	132	467	184	141
Speech ... ..	25	78	43	64
Cervical Glands ... ..	14	244	11	29
Heart and Circulation ... ..	26	98	20	15
Lungs ... ..	38	197	72	91
Developmental (a) Hernia ... ..	1	4	3	8
(b) Other... ..	11	42	10	8
Orthopaedic (a) Posture ... ..	45	113	17	6
(b) Flat foot ... ..	145	77	34	9
(c) Other... ..	114	221	70	47
Nervous system (a) Epilepsy ... ..	1	9	1	5
(b) Other ... ..	2	39	12	37
Psychological (a) Development ... ..	1	33	2	6
(b) Stability ... ..	—	54	2	13
Other... ..	63	291	241	199



## Minor Ailments.

Treatment is carried out by school nurses at schools where the conditions permit it and otherwise at associated clinics. The number and nature of the conditions treated are set out in Table 85.

**Table 85.**  
**Minor Ailments Treated (excluding uncleanness).**

						Number of Defects treated, or under treatment during	
						1954	1955
SKIN—							
Ringworm—Scalp—							
(i) X-ray treatment						—	—
(ii) Other treatment						—	—
Ringworm—Body						5	5
Scabies						8	15
Impetigo						1,074	796
Other skin diseases						1,490	1,384
EYE DISEASE—							
(External and other, but excluding errors of re-							
fraction, squint and cases admitted to hospital)						1,090	1,152
EAR DEFECTS—							
(Excluding serious diseases of the ear, e.g., operative							
treatment in hospital, etc.)						746	757
MISCELLANEOUS—							
(e.g., minor injuries, bruises, sores, chilblains, etc.)						23,202	17,452
Total						27,615	21,561
Total number of attendances at Authorities' minor ail-							
ments clinics						50,589	42,150

## Uncleanness.

The figures given below indicate that louse infestation as determined by the examinations carried out by the nursing staff has reached in 1955 the lowest level achieved since the end of the war and that the reduction is progressive over a number of years. The improvement in the hygienic conditions under which people live both at home and at school must have played an appreciable part in this improvement but the nursing staff have continued actively their work of educating parents and adolescents in treating and preventing this obnoxious and unjustified social problem and the cleansing staff have combed, washed and scrubbed as vigorously as ever. 4,138 children made 4,155 attendances at the Ellen Street and Cuttle Street cleansing centres.

Table 86. Uncleanliness.			
Total number of examinations in the schools by the school nurses	...		36,212
Total number of individual pupils found to be infested	...	...	1,545

Table 87. Percentage of School Children found to be infested during 10 years 1946-1955.			
Year	Estimated School Population	Number found Infested	% Infested
1955	16,477	1,545	9
1954	16,708	1,806	11
1953	16,162	2,192	14
1952	15,715	2,209	14
1951	15,340	1,769	12
1950	15,321	2,266	15
1949	15,216	2,670	18
1948	14,647	2,214	15
1944	13,963	1,717	12
1946	13,466	3,521	26

**Specialist Services.**

**Ear, Nose and Throat Clinic.**

Two sessions per week, on the average, were held at the Open Air School Clinic for the examination and treatment of ear, nose and throat conditions, and three operating sessions each week were carried out at Sharoe Green Hospital. The work at the clinic includes the diagnosis and treatment of acute and chronic ear, nose and throat conditions, for which referral for operation or treatment administered by the clinic nurse may be recommended. It also includes the diagnosis and prognosis of deafness in children using the pure-tone audiometer and the Peep Show assembly where necessary. Among the cases thus dealt with are children referred for investigation of deafness discovered by gramophone audiometry in schools.



The following is a summary of the work carried out :—

**Table 88.**  
**Work carried out at E.N.T. Clinic.**

New cases	...	...	...	...	...	...	...	...	324
Re-inspections	...	...	...	...	...	...	...	...	811
Referred for treatment in hospital	...	...	...	...	...	...	...	...	226
"    "    "    "    " clinic	...	...	...	...	...	...	...	...	86
"    " re-inspection	...	...	...	...	...	...	...	...	682
"    " X-rays	...	...	...	...	...	...	...	...	143
"    " audiometry tests	...	...	...	...	...	...	...	...	70
Deaf aid clinic	...	...	...	...	...	...	...	...	6
Total attendances	...	...	...	...	...	...	...	...	2,808
<b>Treatment—</b>									
Operative at Sharoe Green—Tonsils and adenoids	...	...	...	...	...	...	...	...	284
"    "    "    " other nose and throat conditions	...	...	...	...	...	...	...	...	16
"    "    "    " diseases of the ear	...	...	...	...	...	...	...	...	3
Audiometry tests	...	...	...	...	...	...	...	...	92
Other forms of treatment	...	...	...	...	...	...	...	...	71

## **Audiometry.**

Hearing testing using the gramophone audiometer has been carried out in 15 schools on 9-year-old and 10-year-old children. The test is carried out in the classroom, and all have a pair of head-phones through which come the sound of numbers being read out and these the children have to write down. Children failing to pass at the 9 decibel level were first retested immediately, and if they still failed were given further audiometry, using the gramophone or pure-tone audiometer, after 1—2 months. Children who again failed to pass were referred to the Ear, Nose and Throat Clinic for further investigation and treatment of their hearing defect.

527 children were tested and 12 were finally referred to the consultant otologist for further investigation of their hearing defect.

Increasing use is being made of the pure tone audiometer and peep show assembly and in 1955 92 tests were carried out on 67 children.

## **Ophthalmic Clinics.**

### **(a) Squint Clinic.**

The number of new cases seen at this clinic increased by 50% in 1955 the principal factor being the introduction of routine tests at 8 years. Though this means that children have appeared for specialist investigation and treatment earlier than in the past it can be considered as no more than one step in the right direction. The younger the child and the earlier the ascertainment the more likelihood is there of successful treatment and this must be the aim.

<b>Table 89.</b>								
<b>Work carried out at Squint Clinic.</b>								
New cases .. .. .	70							
Re-inspections .. .. .	511							
Refractions carried out .. .. .	81							
Prescriptions issued .. .. .	227							
Referred to orthoptic clinic .. .. .	2							
Referred for operative treatment .. .. .	12							
Total attendances .. .. .	586							

**(b) Refraction Clinic.**

Separate sessions are still held thrice weekly for the correction and treatment of defects of vision not including squint.

Details of the work are given below.

[illegible]

## Paediatric Clinic.

This clinic is held once a fortnight at the Open Air School for children suffering from general medical conditions, and particularly for cardiac and asthmatic cases. In the past year or so, treatment with some recently introduced drugs such as orthoxine and cortisone has greatly helped some of the asthmatic children. The coeliac disease patients have been kept on a gluten-free diet, involving the use of special flour, whether they have had specific symptoms or not, and their general health seems definitely to have improved as a result.

A record of the work done is set out underneath.

Number of individual children attended	...	...	...	...	...	110
New cases	...	...	...	...	...	36
Re-inspections	...	...	...	...	...	212
Total attendances	...	...	...	...	...	238
Referred—X-ray	...	...	...	...	...	10
Admission to hospital	...	...	...	...	...	2
Other forms of treatment	...	...	...	...	...	20



110 cases were dealt with during the year classified as follows :—

**Table 92.**  
**Cases dealt with at Paediatric Clinic.**

Cerebral Palsy ... ..	17
Other lesions of the Nervous System ... ..	2
Asthma and Associated Conditions ... ..	27
Bronchitis and Bronchiectasis ... ..	12
Cardiac Lesions ... ..	19
Anaemia ... ..	1
Rheumatism ... ..	2
Obesity ... ..	2
Fits ... ..	6
Coeliac Disease ... ..	2
Others ... ..	20

### Orthopaedic Clinic.

A clinic continues to be held monthly at the Open Air School at which the physiotherapists attend with their cases to see the orthopaedic surgeon. The overall joint establishment provides for a physiotherapist in daily attendance at Cuttle Street, Manchester Road, Tulketh Road and the Open Air School clinics, but staff shortage seriously curtailed the work done at these clinics where 374 children were treated during the year and a further 227 underwent a course of artificial sunlight therapy.

A record of the work done at the Orthopaedic Clinic is given below.

**Table 93.**  
**Work carried out at Orthopaedic Clinic.**

Number of individual children attended ... ..	214
New cases ... ..	50
Total number of attendances made ... ..	368
Number of children referred for treatment in hospital ... ..	4
Number of Surgical Appliances, e.g., boots, irons, etc., supplied through Centre ... ..	114
Number of children X-rayed ... ..	41
Defects from which children were suffering :—	
Paralysis—	
Infantile ... ..	10
Spastic ... ..	13
Birth Palsy ... ..	1
Deformities—	
Congenital ... ..	46
Traumatic ... ..	7
Other ... ..	99
Rickets ... ..	31
Tuberculosis ... ..	3
Inflammations ... ..	2
Miscellaneous ... ..	2
Total ... ..	214

### School Dental Service.

I am indebted to the Senior Dental Officer, Mr. J. C. Knowles, for the following report on the School Dental Services for the year 1955 :—

“There has been an improvement in the staffing position with the result that the amount of treatment carried out during the year shows an increase of approximately 60% over that of the previous year ; detailed figures are shown in Table 94.

One dental officer, appointed early in the year, failed to render the expected service due to ill-health and other reasons, and resigned in October.

The amount of treatment required per child is high. Further increase of operative staff is necessary and much lee-way must be made up before adequate treatment of the school population can be achieved.

A dental wing is to be added to the clinic under construction at Saul Street. When this is equipped and staffed it is hoped to achieve better service.

More time has been devoted to orthodontic treatment in the conduct of which the installation of a first-class dental X-ray unit has been of great assistance.

It is felt that mention should be made of the unsatisfactory position of dental attendants upon whose efficient services the success of the school dental service undoubtedly depends. Recent events have resulted in their being unfavourably placed in comparison with other employees of similar and even lower attainments. Failing some considerable increase in their salaries and prospects in the near future, present staff will be driven to seek other employment and suitable women will not be attracted to replace them.”

**Table 94.**  
**Dental Inspection and Treatment.**

1.	Number of pupils inspected by the Authority's Dental Officers—						
	(a)	Periodic Age Groups	...	...	...	...	13,621
	(b)	Specials	...	...	...	...	1,679
							15,300
2.	Number found to require treatment						9,688
3.	Number referred for treatment						8,488
4.	Number actually treated						4,969
5.	Attendances made by pupils for treatment						12,216
6.	Half-days devoted to :						
	(a)	Inspections	...	...	...	...	87
	(b)	Treatment	...	...	...	...	1,958
	Total (a) and (b)						2,045
7.	Fillings :						
		Permanent Teeth	...	...	...	...	5,540
		Temporary Teeth	...	...	...	...	2,103
	Total						7,643
8.	Number of Teeth filled :						
		Permanent Teeth	...	...	...	...	4,844
		Temporary Teeth	...	...	...	...	2,045
	Total						6,889
9.	Extractions :						
		Permanent Teeth	...	...	...	...	1,083
		Temporary Teeth	...	...	...	...	5,644
	Total						6,727
10.	Administration of general anaesthetics for extraction						2,184
11.	Other operations :						
		Permanent Teeth	...	...	...	...	5,436
		Temporary Teeth	...	...	...	...	1,982
	Total						7,418



Handicapped Pupils.

The disposition of handicapped pupils at the end of the year is shown in Table 95.

Table 95. Disposition of Handicapped Pupils.									
Classification	No.	Special School		Teaching		Hospital	Ordinary School	No. School or Institution	
		Day	Residential	Home	Speech Therapy				
Blind ... ..	1	5	1				1		
Partially sighted ... ..	8		2						
Deaf ... ..	12		12				12		
Partially deaf... ..	18		6				8		
Delicate ... ..	102	85	2	5			21	2	
Educationally subnormal ... ..	94	65	2					6	
Epileptic ... ..	4	1	3				4	2	
Maladjusted ... ..	18		12	9			3	2	
Physically handicapped ... ..	39	18	7		124	1	157	1	
Speech defect ... ..	157								
Multiple defects—									
Delicate and maladjusted...	4	2	2						
Delicate and speech ... ..	4	4			3				
Delicate, E.S.N. and partially deaf ... ..	2	2							
Delicate and partially deaf P.H. and delicate ... ..	1	1							
P. H. and speech ... ..	2	2			6				
P.H., delicate and maladjusted ... ..	6	6							
adjusted ... ..	1	1							
E.S.N. and delicate ... ..	5	5							
E.S.N. and P.H. ... ..	2	1						1	
E.S.N. and partially deaf... ..	1	1							
Maladjusted and E.S.N. ... ..	5		5						
Maladjusted and partially deaf ... ..	1		1				1		
Speech and partially deaf...	1								
	488	199	55	14	133	1	207		12

Admission to special schools usually takes place at the beginning of a school term and discharge at the end of a term, whilst the figures given in Table 95 relate to the position at the end of the year. In practice, therefore, the number of children in special schools generally is rather higher than might be implied from the figures quoted.

### **Educationally Subnormal Children.**

It is a duty of the Local Education Authority to ascertain children who are not able to benefit from education in the normal school because of limited mental ability.

Children who are materially handicapped in this way are usually known to the medical staff of the Health Department before reaching the age of five and are kept under close observation throughout early life.

Less handicapped children go to school in the ordinary course of events when deviations from the usual pattern of progress are noticed. Such children are thoroughly investigated and where necessary appropriate advice is submitted to the Local Education Authority.

A medical officer must be approved by the Minister of Education before he can make these examinations. Five of the school medical officers are so approved.

The majority of children ascertained as educationally subnormal are admitted to the E.S.N. section of the Open Air School at Moor Park as day pupils at the age of seven years or over. Very close attention is paid to these children and the medical officer sees both them and their parents regularly. Towards the end of their school life the team of medical officer, headmaster and youth employment officer confer amongst themselves and with the parents to determine the employment likely to be most suited to the child's capabilities.

During the year 72 investigations were carried out and the following table shows the results of these :—

<b>Table 96.</b> <b>Education Act, 1944, sections 34 and 57.—Children examined</b> <b>and reported upon.</b>					
No. deemed to be educationally subnormal	...	...	...		28
For Admission to day special school for E.S.N.	...	...	...	25	
Remaining in day special school for physically handicapped—					
dual defects	...	...	...	1	
Special tuition in ordinary school	...	...	...	2	
No. deemed not to be educationally subnormal	...	...	...		21
No. recommended for transfer from day special to residential					
school	...	...	...		1
No. reported as ineducable—S.57(3)	...	...	...		5
No. reported as needing supervision—S.57(5)	...	...	...		17
Total	...	...	...		72



The main provision for the educational treatment of educationally sub-normal children is in the special section of the Open Air School at Moor Park. Fifteen children were admitted and 20 discharged during the year leaving seventy-nine on the register at the close of the year.

Of those discharged one was reported to the Local Health Authority under S.57(3) and eighteen under S.57(5) of the Education Act, 1944, one was transferred to a residential school. Provision is also made at residential schools belonging to other bodies and at the close of the year four children were in residence, two at Pontville School, Ormskirk, and two at Besford Court, Worcester.

## Physically handicapped and delicate children.

These groups consist of children who because of disease or impaired physical condition require special educational treatment. This may take several forms :

### 1. AT ORDINARY SCHOOL.

As far as possible children with handicaps are kept at their own school amongst their fit companions. There they are regularly reviewed by the school medical officer and if necessary may be excused games or strenuous exercise.

## 2. AT THE OPEN AIR SCHOOL.

Children with certain chest conditions, e.g., asthma, or heart or orthopaedic defects often benefit from education at the Open Air School, but other children who are underweight or generally below par also show definite improvement after a spell at this school. Their appetite and colour improve, and quite often they gain weight rapidly.

### 3. AT RESIDENTIAL SPECIAL SCHOOL.

Where children are more severely handicapped, they may be admitted to a residential school. Such cases include severe heart defects and asthma.

The number of children attending the Open Air School and the reasons for discharge during 1955 are shown in Table 97.

[illegible]

Table 98.											
Classification of cases admitted to Physically Handicapped Section of Open Air School.											
Asthma	...	...	...	...	...	...	...	...	...	...	7
Asthma and Eczema	...	...	...	...	...	...	...	...	...	...	3
Bronchitis	...	...	...	...	...	...	...	...	...	...	3
Cerebral Palsy	...	...	...	...	...	...	...	...	...	...	2
Chronic Bronchitis	...	...	...	...	...	...	...	...	...	...	3
Epilepsy	...	...	...	...	...	...	...	...	...	...	2
General debility	...	...	...	...	...	...	...	...	...	...	11
Debility following tubercular peritonitis	...	...	...	...	...	...	...	...	...	...	1
Tuberculosis of spine	...	...	...	...	...	...	...	...	...	...	1
Post-operative debility	...	...	...	...	...	...	...	...	...	...	1
Orthopaedic defects	...	...	...	...	...	...	...	...	...	...	4
Rheumatic carditis	...	...	...	...	...	...	...	...	...	...	1
											39

As in the case of educationally subnormal pupils, a conference on their future employment is held in the case of all physically handicapped children attending the Open Air School shortly before they reach school-leaving age. The head teacher, youth employment officer, school medical officer and the parent concerned discuss each child's fitness and suitability for different forms of employment, the aim being so far as possible to place the child in work that is suitable in relation to his capabilities and his physical condition.

The number of physically handicapped or delicate children in residential schools at the end of the year is shown in Table 99.

Table 99.											
Physically handicapped children in residential schools.											
Bleasdale House, Silverdale	...	...	...	...	...	...	...	...	...	...	1
Margaret Barclays, Mobberley	...	...	...	...	...	...	...	...	...	...	1
Bethesda Home, Salford	...	...	...	...	...	...	...	...	...	...	1
St. John's, Woodford Bridge	...	...	...	...	...	...	...	...	...	...	2
St. Joseph's Heart Hospital School, Liverpool	...	...	...	...	...	...	...	...	...	...	1
Children's Convalescent Home, West Kirby	...	...	...	...	...	...	...	...	...	...	1
Welburn Hall, York	...	...	...	...	...	...	...	...	...	...	1
St. Patrick's Open Air School, Hayling Island	...	...	...	...	...	...	...	...	...	...	1
School of Stitchery and Lace, Bookham, Surrey	...	...	...	...	...	...	...	...	...	...	1

Cerebral Palsy.

One new case was admitted to the class during the year, an athetoid child of average intelligence, and at the end of the year six borough children and three from outside authorities were in attendance at the special day spastic unit at the Open Air School.

The members of the class have made steady progress both in activity and in school work. Two more children can walk a short distance unaided, the baths



are very popular, one child can dive into the bath and four others have learnt to swim.

Individual children join with the rest of the school for certain classes—three with a percussion band, two in history class and one in woodwork and gardening.

A boy who left the class in 1954 has been admitted to the Lord Mayor Treloar's Training School.

One girl who is less handicapped and able to get about unaided is in the main school and joins in all activities.

The regular group discussions between parents and the team of workers headed by the paediatrician have continued and are apparently well appreciated by the parents.

### **SPEECH THERAPY.**

At the beginning of the year 130 children were already having treatment.

During the course of the year 90 children were reviewed when 80 were accepted for treatment, 7 were found not to need special treatment, 2 were returned to the waiting list to have treatment at a later date and one was found to have moved from the Borough since referred.

134 children were under treatment at the close of the year and in 76 cases treatment had been terminated. Of these 76 cases 43 were discharged as improved, 26 ceased to attend before completion of treatment, 2 left the town and 5 reached school-leaving age.

Of the 43 cases showing improvement at the end of treatment 28 were suffering from dyslalia, 11 from a stammer, 3 from both dyslalia and stammering and one was a spastic.

At the end of the year 33 children were awaiting treatment.

### **Home Teaching.**

The provision of education in the home to children who, by reason of long-standing illness, were unable to utilise the other educational facilities, special or otherwise, provided in the schools, but who were in need of and would benefit from education, continued throughout the year.

Table 100 below indicates the use made of the services :—

**Table 100.**  
**Home Teaching.**

Number of children receiving home teaching at the beginning of the year ...	22
Number of new children added ... ..	11
Recommended home teaching after return from hospital ... ..	1
Number no longer in need of home teaching ... ..	20
Admitted to residential school ... ..	1
Number receiving home teaching at the end of the year ... ..	13

### **OTHER PROVISION.**

I am indebted to Mr. Tuson, the Chief Education Officer, for the following notes on physical education, school meals and milk in schools :—

### Physical Education.

“This year saw the successful opening of a Games Centre in the west of the town to replace the Ribbleton Hall Centre. This and the one at Penwortham Holme provide playing facilities and coaching during the summer for many young people of post-school age.

A six-session course was held for men leaders in Youth Clubs on work with little or no apparatus.

An increased interest in inter-school boxing has been reflected by the success of a course for teachers in Judging and Refereeing, and a one-day athletics course for teachers was conducted by the Chief Coach to the Amateur Athletic Association. Experiments have been conducted in the application of Circuit Training to work with older boys.

Physical Education in junior schools was marked by a series of class demonstrations, showing some of the more recent trends.

### SCHOOL MEALS.

“The School Meals Service provides milk, dinners and teas. Teas and breakfasts are taken at the Open Air School and Stoneygate Nursery School, and during the summer 5,748 packed dinners and 5,923 packed teas were supplied to schools going on educational visits. At Christmas, 14,724 party teas were provided for school parties, compared with 13,990 in 1954.

A total of 60 dining centres catered for dinners during the year. A summary of the findings of three surveys carried out gives the number of children taking dinners on three normal school days :—

February, 1955	...	...	...	...	...	7,699.
June	...	...	...	...	...	7,476.
September	...	...	...	...	...	7,886.

The total number of dinners supplied during the year was 1,725,347.”

### Milk-in-Schools Scheme.

“During the year 1955, some 3,008,073 bottles of milk were consumed in the Primary and Secondary Schools, representing a daily average of 15,116.”

### Convalescent Homes.

262 children were examined and considered suitable to be sent to the Thomas Parkinson House, St. Annes, the majority of whom remained for a period of two weeks. 25 children spent three weeks and two four weeks at the home.

### Training College Entrants.

39 candidates for admission to various teacher training colleges were medically examined by the school medical officers during 1955.